Lisa Pierrard

Department of Energy
Portsmouth Enrichment Office
P.O. Box 700
Piketon, Ohio 45661-0700
Phone (614) 897-5000

February 10, 1993
EO-23-3713

Ms. Donna Goodman
Ohio Environmental Protection Agency
2195 Front Street
Logan, Ohio 43138-9031

Dear Ms. Goodman:

DEPARTMENT OF ENERGY (DOE) PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS) REVISED RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) PART "A" APPLICATION

Reference is made to your letter, dated December 11, 1992, which provided clarification on the RCRA closure status for PORTS X-700 Tanks 6 and 8.

Per your direction, enclosed is a revised RCRA Part "A" Application for PORTS which removes the X-700 Tanks 6 and 8 from the application. This is the only change to the application.

If you have any questions, please contact Melda Rafferty of my staff at (614) 897-5521.

Sincerely,

Eugene W. Gillespie
Site Manager
Portsmouth Site Office

EO-23:Rafferty

cc w/enclosure:
Thomas Crepeau, Ohio EPA/Columbus
Lisa Pierrard, USEPA/Chicago

Department of Energy
Portsmouth Enrichment Office
P.O. Box 700
Piketon, Ohio 45661–0700
Phone: 614 / 897-5010

April 6, 1992
EO-23-2408

Ms. Donna Goodman
Ohio Environmental Protection Agency
Southeast District Office
2195 Front Street
Logan, Ohio 43138

Ms. Lisa Pierrard
U.S. Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604

REVISED RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) PART A PERMIT APPLICATION

Enclosed is a revised RCRA Part A Permit Application for the Portsmouth Gaseous Diffusion Plant. This permit application has been revised to contain the following units: X-700 Hazardous Waste Storage Tank #6 and X-700 Hazardous Waste Storage Tank #8.

If you have any further questions or comments, please contact Melda Rafferty of my staff at 614/897-3821.

Sincerely,

Eugene W. Gillespie
Site Manager
Portsmouth Site Office

EO-23:Rafferty

Enclosure

OH 890 008 983

Department of Energy
Portsmouth Enrichment Office
P.O. Box 700
Piketon, Ohio 45661–0700
Phone: 614 / 897-5010

February 17, 1992
EO-23-2256

Ms. Donna Goodman
Ohio Environmental Protection Agency
Southeast District Office
2195 Front Street
Logan, Ohio 43138

Ms. Lisa Pierard
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604

Dear Ms. Goodman and Ms. Pierard:

REVISED RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) PART A PERMIT

Enclosed please find the revised RCRA Part A Permit documentation for the Portsmouth Gaseous Diffusion Plant (PORTS). During reviews of the closure plan for the X-750 Hazardous Waste Storage Tank, PORTS identified that the hazardous waste code F004 had not been provided in the RCRA Part A Permit. The F004 hazardous waste code has been added to this revised Part A.

If you have any further questions or comments, please contact Melda Rafferty of my staff at 614/897-3821.

Sincerely,

Eugene W. Gillespie
for Eugene W. Gillespie
Site Manager
Portsmouth Site Office

EO-23:Rafferty

Enclosure
As stated

A—2112 (12—80)

MEMOR...DUM OF CONFERENCE OR CON...SATION

Date (1) 4/9/91 | Time (2) 3:45 | (3) [X] TELEPHONE [ ] PERSONAL

ORIGINATING PARTY	OTHER PARTIES
(4) Keith Bradswell	Lisa Pierard, Region V, USEPA, RCRA Permits

Subject

(6) Filing Modified Part A Permit for X-7725 with USEPA

Discussion

(7) I discussed with Lisa the meeting with Ohio EPA 4/5/91. I described Dave Shaltis' suggestion that DOE/MMES submit a modified Part A Permit for X7725 for approval by USEPA. Lisa responded by saying that would be inappropriate because USEPA transferred RCRA authority for the base program to Ohio EPA. Lisa then referenced the telephone conversation she had with Dave Shaltis this morning during which she related similar information to Dave that only Ohio has the authority to act on the base RCRA program. I then said I felt Dave's main concern was demonstrating that a Director's exemption for expanded capacity is equivalent with the USEPA procedures. Lisa said equivalency could be demonstrated if the

Conclusion Or Agreements

(8) expanded capacity is justified on the basis that there is insufficient treatment, storage and disposal capacity off-site. I said I would follow up with a call to Dave Shaltis.

Distribution

Tom Perry
Dick Blake
Melda Rafferty
Dick Snyder
Buck Stewart
Willis Walker
Jeff Hedges

Rc

Signed (9) Keith Bradswell

Department of Energy
Portsmouth Enrichment Office
P.O. Box 700
Piketon, Ohio 45661-0700
Phone: 614 / 897-5010

February 22, 1991
EO-23-1301

Lisa A. Pierard, Chief
USEPA, Region V
230 South Dearborn Street
Chicago, Illinois 60604

Dear Ms. Pierard:

TCLP, PORTSMOUTH FACILITY (OH7 890 009 983) - 5HR-13

In response to your February 5, 1991 letter concerning our most recent Part A application of January 15, 1991, please find the following information.

A revised Part A application was submitted to the Ohio EPA, Division of Solid and Hazardous Waste Management on September 25, 1990 (see enclosure). Hazardous waste with codes D-018-D043 are included in this application and have been managed at PORTS since this date in accordance with all applicable regulations. The certification statement can be found in the September 25, 1990 submittal.

Should you have any questions, please contact Melda Rafferty of my staff at (614) 897-5010.

Sincerely,

Eugene W. Gillespie
Site Manager
Portsmouth Enrichment Office

Enclosure:
As stated

Department of Energy
Portsmouth Enrichment Office
P.O. Box 700
Piketon, Ohio 45661-0700
Phone (614) 897-2151

September 25, 1990
EO-221-916

Ms. Linda Welch
Division of Solid and Hazardous Waste Management
Ohio Environmental Protection Agency
Post Office Box 1049
1800 Water Mark Drive
Columbus, OH 43266-0149

Ms. Donna Goodman
Ohio Environmental Protection Agency
Southeast District Office
2195 Front Street
Logan, OH 43138

Madam:

REVISED PART A HAZARDOUS WASTE PERMIT APPLICATION

The attached Revised Part A Hazardous Waste Permit Application is submitted for inclusion in the Portsmouth Gaseous Diffusion Plant Part B permit application review. This revision addresses the concerns raised by your letter of August 17, 1990.

Three facilities are requested to be added as hazardous waste storage facilities at PORTS:

1. X-744H Warehouse;
2. XT-847 Warehouse; and
3. X-3346 Feed and Withdrawal Building.

The justification for the addition of these facilities is to properly manage hazardous and mixed wastes that are generated at containers (~380,000 lbs) per year. Currently there are no disposal options for the RCRA mixed wastes. An incinerator in Oak Ridge, Tennessee will process most of the waste, but will produce ashes which still require storage. Also, the backlog for this incinerator will require several years to process. A 1994 Line Item Project (LIP) is under study for the treatment of RCRA mixed wastes, however, it is estimated that the completion date of the project is 5 to 8 years away. During the time prior to the completion of the LIP, as many as 5000 containers (both 110-gallon and 55-gallon drums) may be generated.

In addition, the various Environmental Restoration (ER) projects are generating both hazardous wastes and hazardous mixed wastes. The Remedial Facility Investigation (RFI) phase will generate an estimated 2000 drums of waste over the next two years. Approximately 500 of these containers will contain RCRA mixed wastes with the remainder being classified as RCRA wastes. The estimate of wate generation does not include any waste generated for closure of any RCRA facility. As an example, the X-701B sludge removal project generated 1460 containers of RCRA mixed wastes. Each of these containers holds 3.5 cubic yards (~6000 lbs). The placement of this large number of containers in the X-744G facility consumed a large amount of usable storage area.

Hazardous waste generation at PORTS amounts to approximately 1200 containers (~480,000 lbs) per year. It is anticipated that, pending approval of the requested changes and the completion of projects to bring the buildings into RCRA standards, the main facility for handling RCRA hazardous wastes will be moved to the XT-847 or the X-3346 Feed & Withdrawal Building. This action would free the X-752 Facility for the long-term storage of RCRA mixed wastes or other waste storage. Both the XT-847 and the X-3346 have sufficient room to allow the staging of wastes prior to the designation of proper (RCRA or RCRA mixed) storage. Additionally, there is room for the future installation of recycling equipment, e.g., solvent distillation units.

Facilities X-701B, X-231B, and X-749 are currently undergoing closure and cannot be clean-closed. These facilities have been included in this revision. Facility X-616 will be clean-closed and is therefore not included in this revision.

Closure plans and post closure plans are being developed under the Consent Decree and will be included in a revised Part B permit application. Definitive post-closure methods are under study along with the closure plans and a schedule for accomplishing the plan development will be included in the Part B.

The X-705 Radicator Facility has been excluded from this revision per OEPA letter dated August 17, 1990.

Also, the Part A Hazardous Waste Permit Application has been reviewed and revised to include necessary changes that reflect the current status of waste handling at PORTS. Regulatory changes, i.e., the new TC hazardous wastes, have necessitated additions to this category of wastes to the list of wastes managed at PORTS. In addition, the removal of various chemicals from the list of hazardous wastes allow the removal of the (formerly) listed chemicals from the Part A application.

If there are any questions, please contact John R. Shaffer of my staff at (614) 897-5010.

Sincerely,

Eugene W. Gillespie
Site Manager
Portsmouth Enrichment Office

EO-221:Shaffer

Enclosures:
As stated

cc/encl: R. E. Blake, PORTS
John Rochotte, OEPA, SEDO
T. A. Acox, PORTS
T. P. A. Perry, K-25

U.S. ENVIRONMENTAL PROTECTION AGENCY

FORM 1 GENERAL — EPA

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting)

I. EPA I.D. NUMBER: F [illegible]7-90008983 [illegible]

LABEL ITEMS

I. EPA I.D. NUMBER	[illegible]
III. FACILITY NAME	US DOE - Portsmouth Gaseous Diffusion Plant
V. FACILITY MAILING ADDRESS	U.S. Department of Energy Post Office Box 700 Piketon, Ohio 45661
VI. FACILITY LOCATION	3930 US Route 23 South Piketon, Ohio 45661

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements, see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)			
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: U S D O E PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
JOHN R SHAFFER	614 897 5010

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: POST OFFICE BOX 700

B. CITY OR TOWN	C. STATE	D. ZIP CODE
PIKETON	OH	45661

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 3930 US ROUTE 23 SOUTH

B. COUNTY NAME: PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
PIKETON	OH	45661	

EPA Form 3510-1 (6-80)

CONTINUE ON REVERSE

A FIRST | B SECOND

7 2819 (specify) Industrial Inorganic Chemi...

C THIRD | D FOURTH

7 (specify) | 7 (specify)

VIII. OPERATOR INFORMATION

A NAME

8 U S D E P A R T M E N T O F E N E R G Y

B Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other", specify.)

F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 6 1 4 8 9 7 5 0 1 0

E STREET OR P.O. BOX

P O S T O F F I C E B O X 7 0 0

F CITY OR TOWN | G STATE | H ZIP CODE

B P I K E T O N | O H | 4 5 6 6 1

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A NPDES (Discharges to Surface Water): 9 N 0 1 0 0 0 0 0 0 * B D

D PSD (Air Emissions from Proposed Sources): 9 P

B UIC (Underground Injection of Fluids): 9 U

E OTHER (specify): 9 0 6 6 C 0 0 0 0 0 (specify) Facility Air Permit Designation

C. RCRA (Hazardous Wastes): 9 R O H 7 8 9 0 0 0 8 9 8 3

E OTHER (specify): 9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous DiffusionPlant has been operating since 195-. The plant enriches uranium for national defense and for commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235. Ancillary processes, systems, and operations serving the enrichment process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment plant, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A NAME & OFFICIAL TITLE (type or print)	B SIGNATURE	C DATE SIGNED
Eugene W. Gillespie, Site Manager	Eugene W. Gillespie	9/25/90

COMMENTS FOR OFFICIAL USE ONLY

C

Please print or type in the unshaded areas only (fill-in areas are spaced for elite type, i.e., 12 characters/inch)

Form Approved OMB No. 158-S80004

FORM 3 RCRA

EPA — U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER: F | 0 | 1 | 7 | 8 | 9 | 0 | 0 | 0 | 8 | 9 | 8 | 3 | | 1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☐ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

☐ 2. NEW FACILITY *(Complete item below.)*

C	YR.	MO.	DAY
8	55	01	14

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided, Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C | DUP | T/A | C 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G						
X-2	T 0 3	20	E		5	S 0 1	1.0×10^6	G	
1	S 0 1	100,000	G		6	S 0 1	17,000	G	
2	T 0 2	35,000	U		7	S 0 1	750,000	G	
3	D 8 1	0.71	B		8	S 0 1	1.25×10^6	G	
4	D 8 0	44.5	A		9	S 0 1	1.1×10^6	G	

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (... FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY

1. X-7[illegible] Hazardous Waste Storage Facility
2. X-7[illegible] Holding Pond
3. X-[illegible] Soil Biodegradation Plot
4. X-749 Contaminated Materials Disposal Facility
5. X-[illegible] Non-UESA Bulk Storage Building
6. X-326 Mixed Waste Storage Facility
7. X-744H Warehouse
8. X-3346 Feed and Withdrawal Building
9. XT-847 GCEP Warehouse

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** – Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES

For listed hazardous wastes. For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes. For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1), and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION. If a code is not listed for a process that will be used describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (*shown in line numbers X-1, X-2, X-3, and X-4 below*) – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A EPA HAZARD. WASTE NO. (enter code)	B ESTIMATED ANNUAL QUANTITY OF WASTE	C UNIT OF MEASURE (enter code)	D PROCESSES 1 PROCESS CODES (enter)	D PROCESSES 2 PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

...ued from page 2

...TE Photocopy this page if you need more than 26 wastes to list

Form Approved. OMB No. 158 S80004

EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
W	OH7890008983	W DUP	DUP

IV DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D001	23,200	P	S01	
2	D002	5,000	P	S01	
3	D002	80,000	P	S01	
4	D007				
5	D001	4,000	P	S01	
6	D008				
7	D003	1,000	P	S01	
8	D004	10	P	S01	
9	D005	10	P	S01	
10	D005	10	P	S01	
11	D006				
12	D006	10	P	S01	
13	D006	90,000	P	S01	
14	D008				
15	D006	500	P	S01	
16	D009				
17	D0[illegible]	0	T	S04	
18	D008	5,000	P	S01	
19	D0[illegible]9	[illegible]	P	S01	
20	D010	[illegible]	P	S01	
21	D011	[illegible]	P	S01	
22	D015	[illegible]	P	S01	
23	D016	[illegible]	P	S01	
24	F001	2,400	P	S01	
25	F002	12,000	P	S01	
26	F003	2,500	P	S01	

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

...page before completing if you have more than 26 wastes to list. Form Approved ...

EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
T X 0 H 7 8 9 0 0 8 9 8 3	T/A/C 1	W	T/A/C 2 DUP DUP

IV DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A EPA HAZARD WASTE NO. (enter code)	B ESTIMATED ANNUAL QUANTITY OF WASTE	C UNIT OF MEASURE (enter code)	D PROCESSES 1. PROCESS CODES (enter)	D PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	F 0 0 5	1,000	P	S 0 1	
2	F 0 0 7	400	P	S 0 1	
3	P 0 1 2	10	P	S 0 1	
4	P 0 2 9	10	P	S 0 1	
5	P 0 6 3	10	P	S 0 1	
6	P 0 9 8	10	P	S 0 1	
7	P 1 0 4	10	P	S 0 1	
8	P 1 0 5	10	P	S 0 1	
9	P 1 0 6	10	P	S 0 1	
10	P 1 0 8	10	P	S 0 1	
11	P 1 1 9	10	P	S 0 1	
12	P 1 2 3	10	P	S 0 1	
13	U 0 0 2	10	P	S 0 1	
14	U 0 1 2	10	P	S 0 1	
15	U 0 1 9	10	P	S 0 1	
16	U 0 2 6	10	P	S 0 1	
17	U 0 3 1	10	P	S 0 1	
18	U 0 3 6	10	P	S 0 1	
19	U 0 3 7	10	P	S 0 1	
20	U 0 4 4	10	P	S 0 1	
21	U 0 5 2	10	P	S 0 1	
22	U 0 5 6	10	P	S 0 1	
23	U 0 6 9	10	P	S 0 1	
24	U 0 7 6	10	P	S 0 1	
25	U 0 7 7	10	P	S 0 1	
26	U 0 7 8	10	P	S 0 1	

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

...this page before completing if you have more than 26 wastes to list

Form Appr[illegible]

EPA I.D. NUMBER (enter from page 1)	T/A	C	FOR OFFICIAL USE ONLY			
OH7890008983		1	W	DUP	2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	U079	10	P	S01	
2	U080	10	P	S01	
3	U108	10	P	S01	
4	U112	10	P	S01	
5	U117	10	P	S01	
6	U122	10	P	S01	
7	U123	10	P	S01	
8	U128	10	P	S01	
9	U131	10	P	S01	
10	U134	10	P	S01	
11	U140	10	P	S01	
12	U144	10	P	S01	
13	U151	10	P	S01	
14	U154	10	P	S01	
15	U159	10	P	S01	
16	U161	10	P	S01	
17	U1[illegible]9	10	P	S01	
18	U188	10	P	S01	
19	U196	10	P	S01	
20	U197	10	P	S01	
21	U201	10	P	S01	
22	U208	10	P	S01	
23	U209	10	P	S01	
24	U210	10	P	S01	
25	U211	10	P	S01	
26	U217	10	P	S01	

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

...E Protection ... use only ... more than 26 wastes to list ... Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY	
O H 7 8 9 0 0 0 8 9 5 3	W DUP	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	U 2 1 8	10	P	S 0 1	
2	U 2 2 0	10	P	S 0 1	
3	U 2 2 3	10	P	S 0 1	
4	U 2 2 6	10	P	S 0 1	
5	U 2 2 8	10	P	S 0 1	
6	U 2 3 9	10	P	S 0 1	
7	U 2 4 0	10	P	S 0 1	
8	U 3 2 8	10	P	S 0 1	
9	U 3 5 3	10	P	S 0 1	
10	U 3 5 9	10	P	S 0 1	
11	D 0 0 6	0	P	0 8 0	
12	D 0 0 8				
13	D 0 0 2	0	P	T 0 2	
14	F 0 0 2	0	P	S 0 4 S 0 1	
15	U 2 4 0	500	P	S 0 1	
16	D 0 1 8	10,000	P	S 0 1	
17	D 0 1 9	100	P	S 0 1	
18	D 0 2 0	100	P	S 0 1	
19	D 0 2 1	100	P	S 0 1	
20	D 0 2 2	100	P	S 0 1	
21	D 0 2 3	100	P	S 0 1	
22	D 0 2 4	100	P	S 0 1	
23	D 0 2 5	100	P	S 0 1	
24	D 0 2 7	100	P	S 0 1	
25	D 0 2 8	10,000	P	S 0 1	
26	D 0 2 9	10,000	P	S 0 1	

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

Form Approved. OMB No. 2050-0039

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY
OH 7890008983	W DUP DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D030	100	P	S01	
2	D031	100	P	S01	
3	D032	100	P	S01	
4	D033	100	P	S01	
5	D034	100	P	S01	
6	D035	10,000	P	S01	
7	D036	100	P	S01	
8	D037	10,000	P	S01	
9	D038	1,000	P	S01	
10	D039	25,000	P	S01	
11	D040	100	P	S01	
12	D041	100	P	S01	
13	D042	100	P	S01	
14	D043	100	P	S01	
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Continued from the front

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3

EPA I.D. NO. (enter from page 1)

F	O	H	7	8	9	0	0	0	8	9	8	3	6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail)

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground—level) that clearly delineate all existing structures, existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 03 7	088 00 02 8

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
	See Attached	

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
	See Attached	

SECTION XVIII CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

U. S. DEPARTMENT OF ENERGY
Owner and Operator

BY: Eugene W. Gillespie
Eugene W. Gillespie
Site Manager

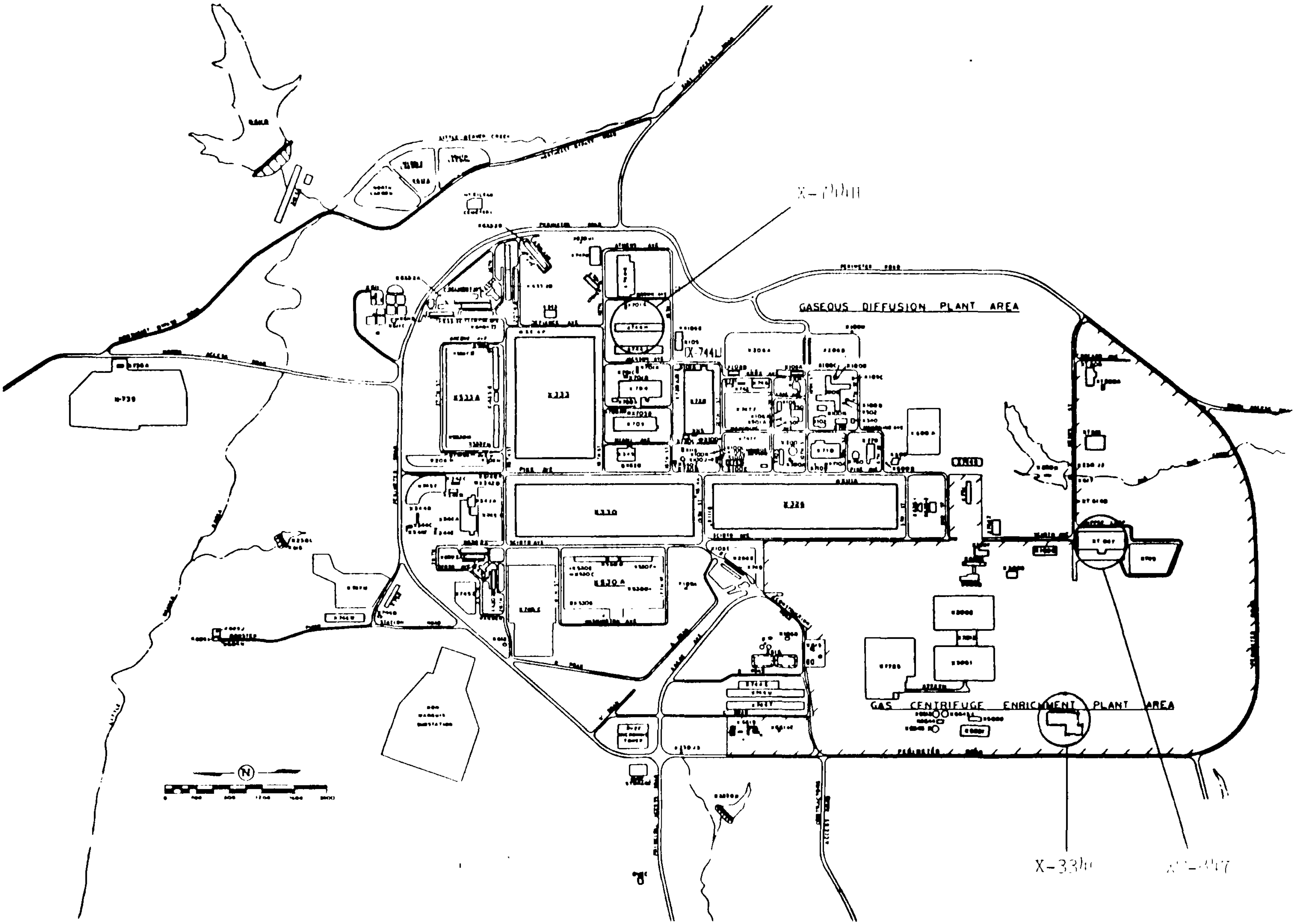
9/25/90
Date Signed

MARTIN MARIETTA ENERGY SYSTEMS, INC.
Co-Operator

BY: Ralph G. Donnelly
Ralph G. Donnelly
Plant Manager

9/25/90
Date Signed

The Department of Energy has signed as "owner and operator" and Martin Marietta Energy Systems, Inc., has signed as "co-operator" this application for their permitted facility. The Department has determined that dual signatures best reflect the actual apportionment of responsibility under which the Department's RCRA responsibilities are for policy, programmatic, funding and scheduling decision, as well as general oversight, and the contractor's RCRA responsibilities are for day-to-day operations (in accordance with general directions given by the Department of Energy as part of its general oversight responsibility), including but not limited to, the following responsibilities: waste analyses and handling, monitoring, record keeping, reporting, and contingency planning. For purposes of the certification required by 40 C. F. R. Section 270.11(d), the Department's and Martin Marietta Energy Systems, Inc.'s representatives certify, to the best of their knowledge and belief, the truth, accuracy and completeness of the application for their respective areas of responsibility.


GASEOUS DIFFUSION PLANT AREA
GAS CENTRIFUGE ENRICHMENT PLANT AREA

Department of Energy
Portsmouth Enrichment Office
P O Box 700
Piketon Ohio 45661-0700
Phone 614 897-5010

January 15, 1991
EO-221-1207

Dr. Richard Shank, Director
Ohio Environmental Protection Agency
1800 Watermark Drive
Columbus, OH 43266-0149

Dear Dr. Shank:

REVISED RCRA PART A INTERIM STATUS PERMIT SUBMISSION; PORTSMOUTH GASEOUS DIFFUSION PLANT

Enclosed is a revision of the RCRA Part A Interim Status Permit for the Portsmouth Gaseous Diffusion Plant. There are 17 units included in this revision: 4 existing storage units, 3 proposed storage units, 4 land disposal units in the process of closure, 1 existing storage tank and 4 newly discovered units.

The X-616 Chromium Sludge Surface Impoundments, X-705A Incinerator, and the X-700 Chromic Acid Storage Tank were inadvertently left off of the previous submission of the Part A Permit, but are included in this revision.

Newly discovered units included in this revision inadvertently received hazardous waste.

The four newly discovered units are identified as follows: (1) X-705 Tank; (2) X-740 Tank; (3) X-740 Storage Unit; (4) X-744G RAD Waste Storage Yard. We will be providing closure plans for these units.

We are reissuing a change in interim status for additional storage at the following units: X-744H Storage Unit; XT-847 Storage Unit; X-3346 Storage Units. Descriptions of these units have also been included in the revised Part B Permit Application provided January 15, 1991 to Ohio EPA. Identification for use of the additional storage units is provided in the revised Part A Permit.

Sincerely,

Eugene W. Gillespie
Site Manager
Portsmouth Enrichment Office

Enclosure

cc w/attach:
Stuard Bruney (OEPA Southeast)
L. Pierard (USEPA, Region V)

cc w/o attach:
J. W. Bennett, NE-33
R. E. Blake, MMES
J. C. Hall, MMES
L. E. Hall (K-25)
G. S. Hartman, EO-22
M. E. Mitchell (K-25)
J. W. Parks, EO-20
S. A. Polston (PAD)
D. E. Ray, MMES
C. W. Sheward, MMES
J. E. Shoemaker, MMES
R. C. Sleeman, SE-31
K. W. Sommerfield (Y-25)
R. L. Wooley, NE-33

MARTIN MARIETTA

MARTIN MARIETTA ENERGY SYSTEMS, INC.

POST OFFICE BOX 628
PIKETON, OHIO 45661

September 10, 1990
103-90-723

Mr. Eugene W. Gillespie, Site Manager
Portsmouth Enrichment Office
U. S. Department of Energy
Post Office Box 700
Piketon, Ohio 45661

Dear Mr. Gillespie:

Revised Part A Hazardous Waste Permit Application

Please submit the attached revised Part A permit application to OEPA for their inclusion in our Part B permit review.

Three facilities are requested to be added as hazardous waste storage facilities at PORTS:

1. X-744H Warehouse;
2. XT-847 Warehouse; and
3. X-3346 Feed and Withdrawal Building.

We recognize that PEO has not offered the XT-847 Warehouse for PORTS waste storage at this time. However, we believe XT-847 may provide significant economic, logistic, and ease of conversion advantages that make it suitable as an alternative to X-3346. Under different circumstances, the XT-847 facility may be needed in addition to the X-3346 facility if Environmental Restoration (ER) waste generation rates are higher than predicted. Including XT-847 in this exemption request allows, but does not bind, PORTS to use it for hazardous waste storage. Therefore, we recommend inclusion of XT-847 in the application at this time and believe the uncertain generation rates including ER activities will justify all three facilities to the OEPA.

The justification for the addition of these facilities is to properly manage hazardous and mixed wastes that are generated at PORTS. RCRA mixed waste generation amounts to approximately 525 containers (~380,000 lbs) per year. Currently there are no disposal options for the RCRA mixed wastes. A 1994 Line Item Project (LIP) is under study for the treatment of RCRA mixed wastes, however, it is estimated that the completion date of the project is 5 to 8 years away. During the time prior to the completion of the LIP, as many as 5000 containers (both 110-gallon and 55-gallon drums) may be generated.

In addition, the various ER projects are generating both hazardous wastes and hazardous mixed wastes. The Remedial Facility Investigation (RFI) phase will generate an estimated 2000 drums of waste over the next two years. Approximately 500 of these containers will contain RCRA mixed wastes with the remainder being classified as RCRA wastes. The estimate of waste generation does not include any waste generated for closure of any RCRA facility. As an example, the X-701B sludge removal project generated 1460 containers of RCRA mixed wastes. Each of these containers holds 3.5 cubic yards (~6000 lbs). The placement of this large number of containers in the X-744G facility consumed a large amount of usable storage area.

Hazardous waste generation at PORTS amounts to approximately 1200 containers (~480,000 lbs) per year. It is anticipated that, pending approval of the requested changes and the completion of projects to bring the buildings into RCRA standards, the main facility for handling RCRA hazardous wastes will be moved to the XT-847 or the X-3346 Feed & Withdrawal Building. This action would free the X-752 Facility for the long-term storage of RCRA mixed wastes or other waste storage. Both the XT-847 and the X-3346 have sufficient room to allow the staging of wastes prior to the designation of proper (RCRA or RCRA mixed) storage. Additionally, there is room for the future installation of recycling equipment, e.g., solvent distillation units.

Facilities X-701B, X-231B, and X-749 are currently undergoing closure and can not be clean closed. These facilities have been included in this revision. Facility X-616 will be clean closed and is therefore not included in this revision.

Closure plans and post closure plans are being developed under the Consent Decree and will be included in a revised Part B permit application. Definitive post-closure methods are under study along with the closure plans and a schedule for accomplishing the plan development will be included in the Part B.

The X-705 Radicator Facility has been excluded from this revision per OEPA letter dated August 17, 1990

Also, the Part A Hazardous Waste Permit Application has been reviewed and revised to include necessary changes that reflect the current status of waste handling at PORTS. Regulatory changes, i.e., the new TC hazardous wastes, have necessitated additions to this category of wastes to the list of wastes managed at PORTS. In addition, the removal of various chemicals from the list of hazardous wastes allow the removal of the (formerly) listed chemicals from the Part A application.

Copies of the Change in Interim Status request should be sent to:

Ohio Environmental Protection Agency
Division of Solid and Hazardous Waste Management
Attention Linda Welch
1800 WaterMark Drive
Post Office Box 1049
Columbus, Ohio 43266-0149

and

Ohio Environmental Protection Agency
Southeast District Office
Attention Donna Goodman
2195 Front Street
Logan, Ohio 43138.

If there are any questions please contact Dick Blake of the Environmental Control Department at 897-2145.

Sincerely

Ralph Donnelly
Plant Manager

RGD:TAAcox:dma

Attachments

cc: R. E. Blake
D. J. Bostock (PAD)
W. R. Golliher (K-25)
G. S. Hartman (DOE-ORO)
M. E. Mitchell (K-25)
J. W. Parks (DOE-ORO)
D. E. Ray
J. E. Rhoderick (DOE-HQ)
C. W. Sheward
J. E. Shoemaker
K. W. Sommerfeld (Y-12)

September 12, 1990

I certify that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete.

Ralph Donnelly
Plant Manager

September 10, 1990

Ohio Environmental Protection Agency
Division of Solid and Hazardous Waste Management
Attention Linda Welch
1800 WaterMark Drive
Post Office Box 1049
Columbus, Ohio 43266-0149

Ohio Environmental Protection Agency
Southeast District Office
Attention Donna Goodman
2195 Front Street
Logan, Ohio 43138.

REVISED PART A HAZARDOUS WASTE PERMIT APPLICATION

The attached Revised Part A Hazardous Waste Permit Application is submitted for inclusion in the Portsmouth Gaseous Diffusion Plant Part B permit application review. This revision addresses the concerns raised by your letter of 8/17/90.

Three facilities are requested to be added as hazardous waste storage facilities at PORTS:

1. X-744H Warehouse;
2. XT-847 Warehouse; and
3. X-3346 Feed and Withdrawal Building.

The justification for the addition of these facilities is to properly manage hazardous and mixed wastes that are generated at PORTS. RCRA mixed waste generation amounts to approximately 525 containers (~380,000 lbs) per year. Currently there are no disposal options for the RCRA mixed wastes. An incinerator in Oak Ridge, Tennessee will process most of the waste, but will produce ashes which still require storage. Also, the backlog for this incinerator will require several years to process. A 1994 Line Item Project (LIP) is under study for the treatment of RCRA mixed wastes, however, it is estimated that the completion date of the project is 5 to 8 years away. During the time prior to the completion of the LIP, as many as 5000 containers (both 110-gallon and 55-gallon drums) may be generated.

In addition, the various Environmental Restoration (ER) projects are generating both hazardous wastes and hazardous mixed wastes. The Remedial Facility Investigation (RFI) phase will generate an estimated 2000 drums of waste over the next two years. Approximately 500 of these containers will contain RCRA mixed wastes with the remainder being classified as RCRA wastes. The estimate of waste generation does not include any waste generated for closure of any RCRA facility. As an example, the X-701B sludge removal project generated 1460 containers of RCRA mixed wastes. Each of these containers holds 3.5 cubic yards (~6000 lbs). The placement of this large number of containers in the X-744G facility consumed a large amount of usable storage area.

Hazardous waste generation at PORTS amounts to approximately 1200 containers (~480,000 lbs) per year. It is anticipated that, pending approval of the requested changes and the completion of projects to bring the buildings into RCRA standards, the main facility for handling RCRA hazardous wastes will be moved to the XT-847 or the X-3346 Feed & Withdrawal Building. This action would free the X-752 Facility for the long-term storage of RCRA mixed wastes or other waste storage. Both the XT-847 and the X-3346 have sufficient room to allow the staging of wastes prior to the designation of proper (RCRA or RCRA mixed) storage. Additionally, there is room for the future installation of recycling equipment, e.g., solvent distillation units.

Facilities X-701B, X-231B, and X-749 are currently undergoing closure and can not be clean closed. These facilities have been included in this revision. Facility X-616 will be clean closed and is therefore not included in this revision.

Closure plans and post closure plans are being developed under the Consent Decree and will be included in a revised Part B permit application. Definitive post-closure methods are under study along with the closure plans and a schedule for accomplishing the plan development will be included in the Part B.

The X-705 Radicator Facility has been excluded from this revision per OEPA letter dated August 17, 1990

Also, the Part A Hazardous Waste Permit Application has been reviewed and revised to include necessary changes that reflect the current status of waste handling at PORTS. Regulatory changes, i.e., the new TC hazardous wastes, have necessitated additions to this category of wastes to the list of wastes managed at PORTS. In addition, the removal of various chemicals from the list of hazardous wastes allow the removal of the (formerly) listed chemicals from the Part A application.

If there are any questions please contact John R. Shaffer of my staff at (614) 897-5010.

Sincerely

Eugene W. Gillespie
Site Manager
Portsmouth Enrichment Office

Attachments

cc/att: R. E. Blake, PORTS
John Rochotte, OEPA, SEDO
T. A. Acox, PORTS
T. P. A. Perry, K-25

Department of Energy
Oak Ridge Operations
P.O. Box 2001
Oak Ridge, Tennessee 37831—

October 18, 1988
DOE-12-89

OH6 890 008 976

Mr. William E. Muno, Chief
RCRA Enforcement Section
U. S. Environmental Protection Agency
Region V, 5HR-12
230 S. Dearborn Street
Chicago, Illinois 60664

Dear Mr. Muno:

ADDITIONAL JUSTIFICATION - REVISION NO. 5 TO RCRA PART A PERMIT APPLICATION

On July 28, 1988, the Part A RCRA application for the FMPC was revised to include Bay 6 of the KC-2 Warehouse for Hazardous Waste Storage. The revised Part A included justification for the approval of Bay 6 under 40 CFR 270.72. The FMPC had not yet received approval from your agency to use Bay 6.

On August 15, 1988, the FMPC was notified that a scheduled shipment of mixed waste to the K-1435 incinerator in Oak Ridge, Tennessee was cancelled. Due to the unique nature of this waste, treatment disposal options are limited.

The cancelled shipment has left the FMPC with a need to utilize Bay 6 for hazardous waste storage. 40 CFR 270.72 (c)(1) allows EPA to approve a change during interim status if "it is necessary to prevent a threat to human health or the environment because of an emergency situation". Any other storage alternatives, other than utilizing Bay 6, would result in a threat to human health or the environment.

Please advise us on the status of the approval of Bay 6 for hazardous waste storage.

Sincerely,

James A Reafsnyder,
Site Manager

DP-84:Stone

COF 72

cc: M. Wilson, SE-31, ORO
M. Travaglini, SE-31, ORO
C. McCord, USEPA-5
M. Logan, USEPA-5
G. Baker, WMCO

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831-8740

October 5, 1988

Dr. Richard Shank, Director
Ohio Environmental Protection Agency
1800 WaterMark Drive
Columbus, Ohio 43266-1049

Mr. George Hamper, Chief
Waste Management Division
Technical Programs Section, Ohio Unit
U.S. EPA, Region V, 230 South Dearborn Street
Chicago, Illinois 60604

Gentlemen:

RCRA PART A PERMIT APPLICATION (REVISION) - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

This letter is in reference to the letter to you from Mr. R. O. Hultgren, dated September 9, 1988, subject as above. We inadvertently sent an unsigned Part A. Enclosed is the signed Part A. We regret the error. If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Remediation Branch at (615) 576-0848 or FTS 626-0848.

Sincerely,

Ronald O. Hultgren

Ronald O. Hultgren, Director
Enriching Operations Division

SE-312:Travaglini

Enclosure:
As stated

cc w/o enclosure:
R. E. Anderson, PORTS
E. W. Gillespie, EO-25

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831-8740

September 9, 1988

Dr. Richard Shank, Director
Ohio Environmental Protection Agency
1800 WaterMark Drive
Columbus, Ohio 43266-1049

Mr. George Hamper, Chief
Waste Management Division
Technical Programs Section, Ohio Unit
U.S. EPA, Region V, 230 South Dearborn Street
Chicago, Illinois 60604

Gentlemen:

RCRA PART A PERMIT APPLICATION (REVISION) - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

Enclosed is a revised Part A Permit Application for the Portsmouth facility. The changes made are to delete the treated chromium sludge waste pile (Form III, Page 1 of 5, line 9) and to add the chromic acid cleaning solution storage tank to this location. In addition, the description of this waste has been added to Form III, Page 3B of 5, lines 11 and 12.

The justification for these changes are the results of determining that the chromium sludge is non-hazardous and discontinuing the chromium cleaning process. During December 1987, and January 1988, it was necessary for Portsmouth to remove the EP-Toxic sludge from the X-616 chromium sludge lagoons to maintain the necessary freeboard to remain in compliance with the regulations. This was accomplished by treating the sludge to render it non-hazardous by the EP-Toxic test. Due to the sludge containing trace quantities of chlorinated solvents, the question arose as to whether this material was a listed waste. Because of the necessity of removing the sludge, the waste pile was granted interim status to allow the storage of the sludge while a hazardous waste determination was made by EPA. EPA has subsequently determined that this sludge is not a listed hazardous waste. Since it is also no longer EP-Toxic, we are deleting it from our Part A.

The chromic acid cleaning process was discontinued and the material drummed (using drums which were supposed to be compatible with the material), and placed in the X-752 hazardous waste facility. Shortly thereafter, one drum failed due to corrosion and an inspection of the others showed failure to be imminent. The material was then transferred back to the acid-brick lined tank from which it had been removed. The chromic acid will remain in this tank while a treatment process is developed. Because this will take longer than 90 days, we are requesting that this tank be granted a change to interim status.

If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Remediation Branch at (615) 576-0848 or FTS 626-0848.

Sincerely,

Ronald O. Hultgren

Ronald O. Hultgren, Director
Enriching Operations Division

SE-312:Travaglini

Enclosure:
Revised Part A

cc w/enclosure:
Brian Blair, OEPA
Bob Swale, EPA-V

cc w/o enclosure:
W. D. Franz, EPA-V
R. E. Anderson, PORTS
T. P. Perry, 1000, ORNL
E. W. Gillespie, EO-25
R. Maynard, VSSP

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831-8740

September 9, 1988

Dr. Richard Shank, Director
Ohio Environmental Protection Agency
1800 WaterMark Drive
Columbus, Ohio 43266-1049

Mr. George Hamper, Chief
Waste Management Division
Technical Programs Section, Ohio Unit
U.S. EPA, Region V, 230 South Dearborn Street
Chicago, Illinois 60604

Gentlemen:

RCRA PART A PERMIT APPLICATION (REVISION) - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

Enclosed is a revised Part A Permit Application for the Portsmouth facility. The changes made are to delete the treated chromium sludge waste pile (Form III, Page 1 of 5, line 9) and to add the chromic acid cleaning solution storage tank to this location. In addition, the description of this waste has been added to Form III, Page 3B of 5, lines 11 and 12.

The justification for these changes are the results of determining that the chromium sludge is non-hazardous and discontinuing the chromium cleaning process. During December 1987, and January 1988, it was necessary for Portsmouth to remove the EP-Toxic sludge from the X-616 chromium sludge lagoons to maintain the necessary freeboard to remain in compliance with the regulations. This was accomplished by treating the sludge to render it non-hazardous by the EP-Toxic test. Due to the sludge containing trace quantities of chlorinated solvents, the question arose as to whether this material was a listed waste. Because of the necessity of removing the sludge, the waste pile was granted interim status to allow the storage of the sludge while a hazardous waste determination was made by EPA. EPA has subsequently determined that this sludge is not a listed hazardous waste. Since it is also no longer EP-Toxic, we are deleting it from our Part A.

The chromic acid cleaning process was discontinued and the material drummed (using drums which were supposed to be compatible with the material), and placed in the X-752 hazardous waste facility. Shortly thereafter, one drum failed due to corrosion and an inspection of the others showed failure to be imminent. The material was then transferred back to the acid-brick lined tank from which it had been removed. The chromic acid will remain in this tank while a treatment process is developed. Because this will take longer than 90 days, we are requesting that this tank be granted a change to interim status.

If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Remediation Branch at (615) 576-0848 or FTS 626-0848.

Sincerely,

Ronald O. Hultgren

Ronald O. Hultgren, Director
Enriching Operations Division

SE-312:Travaglini

Enclosure:
Revised Part A

cc w/enclosure:
Brian Blair, OEPA
Bob Swale, EPA-V

cc w/o enclosure:
W. D. Franz, EPA-V
R. E. Anderson, PORTS
T. P. Perry, 1000, ORNL
E. W. Gillespie, EO-25
R. Maynard, VSSP

MARTIN MARIETTA ENERGY SYSTEMS, INC.

POST OFFICE BOX 628
PIKETON, OHIO 45661

July 22, 1988
103-88-157

Dr. Ronald O. Hultgren, Director
U. S. Department of Energy
Oak Ridge Operations
Post Office Box 2001
Oak Ridge, Tennessee 37831-8651

Dear Dr. Hultgren:

Revised Part A Hazardous Waste Permit Application

Attached with this letter is a revised Part A Hazardous Waste Permit Application. The purpose of the revised Part A is to remove the treated chromium sludge waste pile from the permitting process and to add a hazardous waste storage tank that contains chromic cleaning solution.

During December 1987 and January 1988, PORTS treated a portion of the chromium sludge, an EP Toxic waste, from the X-616 south surface impoundment. Due to the treated sludge containing trace amounts of chlorinated solvents (primarily trichloroethylene), there was the possibility that the treated material could be classified as hazardous although it was no longer EP Toxic. For that reason, the treated sludge waste pile was placed on the Part A pending a ruling by EPA. Subsequently, it has been ruled that the treated sludge was a nonhazardous waste which contained hazardous constituents. Therefore, it is requested that the treated sludge waste pile be removed from the permitting process.

As the result of container failure, a solution of sulfuric acid and sodium dichromate (commonly called chromic cleaning solution) was transferred to an acid-brick lined tank in the X-700 Chemical Cleaning Building for temporary storage. This tank is the same tank that the chromic cleaning solution was in when the tank was in use as a process tank. Therefore, the compatibility of the tank with the chromic cleaning solution is well established. The material will be in storage more than 90 days thus making the tank a hazardous waste storage tank under RCRA. All applicable aspects of the interim status requirements will be met.

The previous submittal of the Part A (103-88-20, January 25, 1988) had the treated chromium sludge listed on Form III, page 1 of 5, line 9. This has been removed and replaced with the chromic cleaning solution. Additionally, the hazardous characteristics of the chromic cleaning solution are listed on Form III, page 3B of 5, lines 11 and 12. It should be pointed out that this is a one time generation of waste resulting from the discontinuation of a process. There is no annual generation of the waste stream.

Full characterization of the chromic cleaning solution is nearly complete and lab scale process simulations are ongoing to determine the best disposal method for the material. When completed, PORTS will forward all necessary information to DOE-ORO for submittal to US EPA and Ohio EPA.

It is requested that DOE-ORO submit a Change of Interim Status Request to Ohio EPA and US EPA reflecting the changes in the revised Part A Permit Application.

If there are any questions, please contact R. E. Anderson at (FTS) 975-2145.

Sincerely,

Ralph Donnelly
Plant Manager

RGD:TAAcox:taa

Enclosure

cc: J. E. Shoemaker, Jr.
K. W. Sommerfeld (MMES, K-25)
C. K. Stalnaker

cc/enc: E. W. Gillespie (DOE-PEO)
H. W. Hibbitts (DOE-ORO)
T. P. A. Perry (MMES, K-25)
M. A. Travaglini (DOE-ORO)
File - TAA - RC

MARTIN MARIETTA

MARTIN MARIETTA ENERGY SYSTEMS, INC.

POST OFFICE BOX 628
PIKETON, OHIO 45661

July 22, 1988
103-88-157

Dr. Ronald O. Hultgren, Director
U. S. Department of Energy
Oak Ridge Operations
Post Office Box 2001
Oak Ridge, Tennessee 37831-8651

Dear Dr. Hultgren:

Revised Part A Hazardous Waste Permit Application

Attached with this letter is a revised Part A Hazardous Waste Permit Application. The purpose of the revised Part A is to remove the treated chromium sludge waste pile from the permitting process and to add a hazardous waste storage tank that contains chromic cleaning solution.

During December 1987 and January 1988, PORTS treated a portion of the chromium sludge, an EP Toxic waste, from the X-616 south surface impoundment. Due to the treated sludge containing trace amounts of chlorinated solvents (primarily trichloroethylene), there was the possibility that the treated material could be classified as hazardous although it was no longer EP Toxic. For that reason, the treated sludge waste pile was placed on the Part A pending a ruling by EPA. Subsequently, it has been ruled that the treated sludge was a nonhazardous waste which contained hazardous constituents. Therefore, it is requested that the treated sludge waste pile be removed from the permitting process.

As the result of container failure, a solution of sulfuric acid and sodium dichromate (commonly called chromic cleaning solution) was transferred to an acid-brick lined tank in the X-700 Chemical Cleaning Building for temporary storage. This tank is the same tank that the chromic cleaning solution was in when the tank was in use as a process tank. Therefore, the compatibility of the tank with the chromic cleaning solution is well established. The material will be in storage more than 90 days thus making the tank a hazardous waste storage tank under RCRA. All applicable aspects of the interim status requirements will be met.

The previous submittal of the Part A (103-88-20, January 25, 1988) had the treated chromium sludge listed on Form III, page 1 of 5, line 9. This has been removed and replaced with the chromic cleaning solution. Additionally, the hazardous characteristics of the chromic cleaning solution are listed on Form III, page 3B of 5, lines 11 and 12. It should be pointed out that this is a one time generation of waste resulting from the discontinuation of a process. There is no annual generation of the waste stream.

Full characterization of the chromic cleaning solution is nearly complete and lab scale process simulations are ongoing to determine the best disposal method for the material. When completed, PORTS will forward all necessary information to DOE-ORO for submittal to US EPA and Ohio EPA.

It is requested that DOE-ORO submit a Change of Interim Status Request to Ohio EPA and US EPA reflecting the changes in the revised Part A Permit Application.

If there are any questions, please contact R. E. Anderson at (FTS) 975-2145.

Sincerely,

for Ralph Donnelly
Plant Manager

RGD:TAAcox:taa

Enclosure

cc: J. E. Shoemaker, Jr.
K. W. Sommerfeld (MMES, K-25)
C. K. Stalnaker

cc/enc: E. W. Gillespie (DOE-PEO)
H. W. Hibbitts (DOE-ORO)
T. P. A. Perry (MMES, K-25)
M. A. Travaglini (DOE-ORO)
File - TAA - RC

→ Jim Jones

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

March 4, 1988

Mr. William D. Franz, Chief
Environmental Review Branch
Federal Facilities Coordinator
Region V
U.S. Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604

Dear Mr. Franz:

PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS), RCRA PART A PERMIT APPLICATION

We have been notified by representatives of Martin Marietta Energy Systems, Inc., (MMES) that on January 14, 1988, EPA requested that MMES submit a revised RCRA Part A permit application for PORTS indicating that MMES as the management and operating contractor for the facility is the "operator," rather than DOE. Apparently this position has been taken as a result of a policy statement issued by EPA Headquarters on RCRA permits generally that are issued for all Government-Owned Contractor-Operated facilities throughout the country.

The Department of Energy has developed a policy for its facilities having management and operating contractors that reflects the policy of EPA Headquarters. DOE's policy recognizes that there may be exceptions to the policy due to the unusual nature of some of our contractual arrangements. Any intent to claim an exception is to be submitted to DOE Headquarters along with a detailed analysis of why the contractor is not responsible for the functions included in the RCRA permits.

The decision of who signs RCRA permits for the various DOE facilities was made a number of years ago, and it has varied from one facility to another because of the roles and responsibilities which the contractor had assumed under its contract. The only recent example that we know of changing such a decision occurred after close review of the roles and responsibilities of DOE and its contractor and, ultimately, after renegotiating the contract to reflect the responsibilities assumed by the contractor in cosigning the permits as operator.

A similar detailed functional and contractual review is being done at PORTS. We expect to have our preliminary analysis completed by April 15. It will be forwarded to DOE Headquarters for review, if necessary. We will keep you informed of the progress of this review and the results.

Sincerely,

Ronald O. Hultgren

Ronald O. Hultgren, Director
Enriching Operations Division

CC-10:CSP

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

February 11, 1988

Mr. George Hamper, Chief
Waste Management Division
Technical Programs Section, Ohio Unit
U.S. EPA, Region V
230 South Dearborn Street
Chicago, Illinois 60604

Dr. Richard L. Shank, Director
Ohio Environmental Protection Agency
1800 WaterMark Drive, Post Office Box 1049
Columbus, Ohio 43266-1049

FEB 16 1988

U. S. EPA, REGION V
SWB — PMS

Gentlemen: OH7 890 008 983

RCRA PART A REVISION - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

Reference is made to my letter dated November 30, 1987, subject as above. Enclosed as required by the 40 CFR 270.72(a) is a revised Part A reflecting the storage of two additional waste streams F003 and F005.

In addition, the Part A has been revised to include two new waste identification numbers. A review of our hazardous waste facility operating log indicated that another waste was misidentified. This waste stream involved 1,1,1-trichloroethane that was identified as U228. It is felt that this should be more appropriately identified as F002. The necessary steps will be taken to correct the operating log as well as the labels on the containers.

The second new waste number is a result of our commitment of evaluating all waste streams at PORTS. Preliminary indications are that a metal turnings waste may be EP Toxic due to the presence of lead in the leachate, warranting an EPA Waste ID Number of D008. At this time, it appears that only part of the metal turnings is hazardous, specifically a brass turning operation. An investigation is continuing in order to determine the exact operation that generates the waste and effectively segregate that waste from other metal turning operations. However, the waste stream has been added to the Part A in anticipation of confirmation of the data. All future turnings that exhibit EP Toxicity will be stored in the X-752 Interim Status Facility.

In the past, this waste stream has been placed into storage at the Low-Level Waste Canister Storage Yard (Southwest of X-744G) with the contaminated scrap metal. The canisters are nickel-lined steel shells with a welded steel bottom. After filling of these with waste, a steel top is also welded on. The scrap metal is being evaluated under DOE's scrap metal program to determine the

COPY 2

feasibility for recycling. Because the regulation of recyclable scrap metal has been deferred (Federal Register dated January 4, 1985) we are not currently adding this facility to our Part A. Additionally, we are still investigating whether any of this material was placed into the X-749 Contaminated Materials Disposal Area. This facility is already listed on the Part A for having received EP Toxic (for lead) hazardous wastes.

If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Protection Division at (615) 576-0848.

Sincerely,

Joe W. Parks, Director
Enriching Operations Division

SE-31:Travaglini

Enclosure:
Revised Part A

cc w/enclosure:
Brian Blair, OEPA
Bob Swale, EPA-V
Terry Acox, PORTS

RECORD OF COMMUNICATION

[x] PHONE CALL [ ] DISCUSSION [ ] FIELD TRIP [ ] CONFERENCE

[ ] OTHER (SPECIFY)

(Record of item checked above)

TO: Ed Klein [illegible]

FROM: Bob Smith [illegible]

DATE: 12/7/87 [illegible]

TIME:

SUBJECT: DOE Portsmouth

SUMMARY OF COMMUNICATION

[illegible]

[illegible signature]

CONCLUSIONS, ACTION TAKEN OR REQUIRED

INFORMATION COPIES
TO:

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

November 30, 1987

Mr. George Hamper, Chief
Waste Management Division
Technical Programs Section, Ohio Unit
U.S. EPA, Region V
230 South Dearborn Street
Chicago, Illinois 60604

Dr. Richard Shank, Director
Ohio Environmental Protection Agency
1800 WaterMark Drive, Post Office Box 1049
Columbus, Ohio 43266-1049

Gentlemen:

RCRA PART A REVISION - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

Reference is made to the letter dated July 1, 1987, from J. C. Hall to W. W. Tyler and K. E. Bremer, subject as above. Enclosed is a revised Part A permit application for PORTS. The changes to the Part A and the justification for the changes are provided in Enclosure 2 of the Part A. As you are aware, through previous discussions, it is imperative that the changes to interim status authorizing the waste pile be approved immediately to allow for treatment of the sludge in the X-616 lagoons.

If you have any questions, please contact Mike Travaglini of our Environmental Protection Division at (615) 576-0848 or FTS 626-0848.

Sincerely,

for Joe W. Parks, Director
Enriching Operations Division

SE-31:Travaglini

Enclosure:
1. Revised Part A Permit Application
2. Justification

cc w/enclosure:
Brian Blair, OEPA
Ed Kitchens, OEPA

Department of Energy
Oak Ridge Operations
Post Office Box E
Oak Ridge, Tennessee 37831

July 1, 1987

Mr. Warren W. Tyler, Director
Ohio Environmental Protection Agency
Post Office Box 1049
Columbus, Ohio 43266-1049

Mr. Karl E. Bremer, Chief
Technical Programs Section
U.S.E.P.A., Region V
Post Office Box A-3587
Chicago, Illinois 60690

Gentlemen:

RCRA PART A REVISION - PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

Reference is made to the letter from W. F. Manning, dated January 22, 1987, subject: "RCRA Part A and Analytical Data - X-705A Radicator - Portsmouth Uranium Enrichment Complex."

In the May 1, 1987 Federal Register (Page 15937), the Department of Energy published a final rule under the Atomic Energy Act (AEA) interpreting the definition of "by-product material" used in section 11e(i) of the AEA. This rule had an effective date of June 1, 1987. This Part A permit application has been revised to include those materials and facilities which were excluded under the previous interpretation of "by-product material."

The enclosed Part A hazardous waste permit application has one new process (i.e., facility) listed on Form 3 under Section III, Processes, on page 1 of 5. Item 7 lists a containerized storage capacity of one million gallons (estimated) in the X-744G Non-Uranium Enrichment Storage Activitiy (UESA) Bulk Storage Building. This facility is used for the storage of spent chemical trap material, miscellaneous dried sludges from small parts decontamination operations, ash from the incineration of radioactively contaminated burnables, and vent stream continuous sampling solution. Many of the materials stored in this building are stored in a nuclear-safe configuration due to the concentration and assay of uranium present in the material. In addition for items 4, 5, and 6, the proper code for "unit to measure" has been entered. These were inadvertently deleted in the previous submission.

Additionally, Page 3B of 5 has been revised to include item 2 through 6 which are the materials stored in the Non-UESA Bulk Storage Building. However, items 2 and 3 do not have an Environmental Protection Agency Hazardous Waste Number. The reason for this is that the materials were previously tested for EP Toxic and, while testing is now underway, the results are not yet available. As soon as the results are available, the Part A will be revised accordingly. The incinerator ash has been previously tested and was found to be EP Toxic with barium and cadmium concentrations in the leachate exceeding the regulatory limits.

Pursuant to the requirements of 40 CFR 270.10(e)(ii) and 40 CFR 270.72(a) and (c), we are requesting that you approve this change (X-7746) to interim status at the Portsmouth Gaseous Diffusion Plant. This change is needed because the volume of material and the need for secure storage and in nuclear-safe configuration precludes the use of the X-752 Hazardous Waste Storage Facility which is outside the plant security fence. Most of the material is being processed through the uranium recovery process; however, due the generation rates occasionally exceeding the recovery rates, storage for more than 90 days is required.

If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Protection Division at (615) 576-0848 or FTS 626-0848.

Sincerely,

for Maurice Stokes

James C. Hall, Acting Director
Enriching Operations Division

SE-31:Travaglini

Enclosure:
Revised Part A

cc w/enclosure:
B. J. Blair, OEPA
Lisa Pierard, EPA-V

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

November 25, 1986

Mr. Karl E. Bremer, Chief
Technical Program Section
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Post Office Box A 3587
Chicago, Illinois 60609

Dear Mr. Bremer:

REVISED PART A PERMIT APPLICATION - PORTSMOUTH URANIUM ENRICHMENT COMPLEX (PUEC)

Reference is made to my letter to Ms. Ardiente and Mr. Tyler, dated April 23, 1986, subject as above.

Enclosed is a revised Part A Permit Application with the following changes:

1. Lines 7 through 20 on page 3 of 5 now reflect all the lab chemicals that were lab packed and noted with just one EPA code on our previous submission.

2. Line 24 on page 3 of 5 now shows 1000 pounds as the annual amount of acidic waste treated at the X-701B holding pond. The previous submission, line 11 on page 3 of 5, had 100 pounds which was a typographical error.

In addition, line 1 on page 1 of 5 reflects the total storage volume for both liquids and solids of the X-752 hazardous waste storage facility. As noted on our previous submission, this increased volume requires approval as a change to interim status as required in 40 CFR 270.72. This increase is justified because no acceptable disposal method currently exists for the mixed wastes currently being stored in X-752. The area extent of X-752 is ~10,500 ft^2 and, with stacking of the waste containers two to three high, will provide for from eight to ten years of storage space. Various treatment and disposal and disposal alternatives are being investigated for these materials but they are not expected to be available for two to four years.

As requested in our previous submission, and as required by 40 CFR 270.72, your prompt approval of this change would be appreciated.

If you have any questions or require additional information, please contact Mike Travaglini of our Environmental Protection Division at (FTS) 626-0848.

Sincerely,

William F. Manning, Director
Enriching Operations Division

SE-31:Travaglini

Enclosure:
Revised Part A

cc w/enclosure:
W. W. Tyler, OEPA
Brain Blair, OEPA
E. A. Bracken, SE-31, FORSTL
M. A. Travaglini, SE-31

cc w/o enclosure:
R. E. Anderson, GAT
H. E. Clark, EO-22
E. W. Gillespie, EO-251

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

April 23, 1986

Ms. Edith Ardiente, Chief
Technical Program Section
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Post Office Box A-3587
Chicago, Illinois 60690

Mr. Warren W. Tyler, Director
Ohio Environmental Protection Agency
361 East Broad Street
Post Office Box 1049
Columbus, Ohio 43266-1049

Dear Madam/Sir:

REVISED PART A PERMIT APPLICATION - PORTSMOUTH URANIUM ENRICHMENT COMPLEX (PUEC)

Reference is made to the following three pieces of correspondence:

1. The letter from H. D. Fletcher to D. Banaszec and Mr. Tyler, dated October 11, 1985, subject "RCRA Part A Permit Application - EPA ID #OH7890008983."

2. My letter, dated January 13, 1986, subject "Revised Part A Permit Application - Portsmouth Gaseous Diffusion Plant."

3. The letter from E. M. Ardiente to H. Doran Fletcher, dated January 16, 1986, subject "Notice of Deficiency - U.S. DOE Portsmouth Uranium Enrichment Plant - OH7 890 008 983."

Enclosed is a revised Part A Permit Application which includes all hazardous waste facilities as requested by the third reference above. Included with the application is the justification of changes made since the January 13 submission. The January 13 submission included the justification for changes made since the original submission.

COF 2

363-9

The enclosed Part A Permit Application includes those mixed waste streams which it appears will be regulated under RCRA given the draft definition of byproduct material that has been developed by DOE/EPA. DOE is working to meet its RCRA permitting requirements using the existing draft definition of byproduct materials as a guideline. However, the information pertaining to mixed waste is being submitted with the understanding that the final resolution of this matter at the Federal level could result in a definition of byproduct material that would exempt certain of the waste streams from RCRA regulation.

If you require additional information, please contact Mike Travaglini of our Environmental Protection Branch at (615) 576-0848 or (FTS) 626-0848.

Sincerely,

William F. Manning, Director
Enriching Operations Division

SE-331:Travaglini

Enclosure:
Part A Permit Application

cc w/enclosure:
M. R. Moschell, OEPA
Lisa Pierard, EPA-V
E. A. Bracken, S-3, FORSTL
M. A. Travalgini, SE-331

cc w/o enclosure:
R. E. Anderson, GAT
H. E. Clark, EO-22
E. W. Gillespie, EO-251

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

January 13, 1986

Ms. Edith Ardiente, Chief
Technical Program Section
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Post Office Box A 3587
Chicago, Illinois 60690

Mr. Warren W. Tyler, Director
Ohio Environmental Protection Agency
361 East Broad Street
Post Office Box 1049
Columbus, Ohio 43216-1049

Dear Madam/Sir:

REVISED PART A PERMIT APPLICATION - PORTSMOUTH GASEOUS DIFFUSION PLANT

Reference is made to the letter from M. Moschell to H. D. Fletcher, dated November 25, 1985, subject "Pike County, U.S. Department of Energy, Portsmouth Uranium Enrichment Plant, Hazardous Materials, OH7890008983."

Enclosed is a corrected copy of the Part A Permit Application which addresses the comments in the referenced letter.

If you require additional information, please contact Mike Travaglini of our Environmental Protection Branch at (615) 576-0848 or (FTS) 626-0848.

Sincerely,

William F. Manning, Director
Enriching Operations Division

SE-331:Travaglini

Enclosure:
Part A Permit Application

cc w/enclosure:
M. R. Moschell, OEPA
Lisa Pierard, EPA-V
M. A. Travaglini, SE-331

cc w/o enclosure:
R. E. Anderson, GAT

OhioEPA
State Of Ohio Environmental Protection Agency

Southeast District Office
2195 Front Street; Logan, Ohio 43138-9031
(614) 385-8501

Richard F. Celeste, Governor

November 25, 1985

U. S. Department of Energy
P.O. Box E
Oak Ridge, Tennessee 37831

Attention: Mr. H. Doran Fletcher

SUJECT: Pike County, U.S. Department of Energy,
Portsmouth Uranium Enrichment Plant, Hazardous Materials,
OH7890008983

Dear Sir:

On October 21, 1985, this office received a cover letter and revised Part A application from you for TSD activities at the above-referenced facility. The application has been reviewed by this office, and is being returned to you for correction. Below is a list of problems noted or changes necessary to allow further review for acceptance:

1. No justification is given for any of the changes made, as required.

2. The X-749 Landfill is shown on the application, as though a request were being made to allow hazardous waste disposal. It is believed this site was intended for listing as a solid waste management unit with a verified release. Please clarify.

3. Please supply the required justification for listing the X-701B impoundment on the revised permit.

4. The units of measure have all been changed to metric units. When re-converted to units given on the previous Part A, lower figures from the original application were obtained, some by one-half the original value. Please check to make sure this is intentional.

5. Improper units of measure were used on Page 3 of 5. Please read the instructions on Page 2 of 5 carefully to complete this section. Several new wastes were added, and some deleted from the previous application without explanation, making review difficult

6. The oil plots have been changed to waste piles, on page one of five, without submitting a closure plan or justification.

Please make the necessary changes and return the corrected copy to our Central Office, with a courtesy copy to me, at your earliest convenience. USEPA has requested Ohio EPA's completeness comments on your facility's Part B application by December 18, 1985.

Our compliance with this deadline is contingent upon your prompt response.

Sincerely,

Michael Moschell

Michael Moschell
Inspector
Division of Solid & Hazardous Waste Management

MM:dm

cc: Tom Crepeau, DSHWM, CO
cc: Ed Kitchen, DSHWM, CO
cc: Bob Anderson, GAT
cc: Lisa Pierard, USEPA, Region V

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

October 11, 1985

Mr. Dan Banaszek
RCRA Activities
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Post Office Box A 3587
Chicago, Illinois 60690

Mr. Warren W. Tyler, Director
Ohio Environmental Protection Agency
361 East Broad Street
Columbus, Ohio 43216

Gentlemen:

RCRA PART A PERMIT APPLICATION - EPA ID #OH7890008983 6 TSD PA

Enclosed is the revised and updated Part A Permit Application for the Portsmouth Gaseous Diffusion Plant. Included with the application is the justification for change in interim status. The Department of Energy (DOE) has combined the RCRA Hazardous Waste and the Radioactive/Hazardous Mixed Waste into this one Part A. This decision is made in anticipation of regulatory changes which might subject these mixed wastes to RCRA jurisdiction. The inclusion of the mixed waste is made at this time, in light of the Hazardous and Solid Waste Amendments of 1984, so as to avoid regulatory problems in the future should these mixed wastes become subject to RCRA.

The enclosed Part A Permit Application includes those mixed waste streams which it appears will be regulated under RCRA given the draft definition of byproduct material that has been developed by DOE/EPA. DOE is working to meet its RCRA permitting requirements using the existing draft definition of byproduct materials as a guideline. However, the information pertaining to mixed waste is being submitted with the understanding that the final

resolution of this matter at the Federal level could result in a definition of byproduct material that would exempt certain of the waste streams from RCRA regulation.

Any questions related to the subject should be directed to Mike Travaglini of our Environmental Protection Branch at (615) 576-0848 to FTS 626-0848.

Sincerely,

for H. Dornan Fletcher, Director
Enriching Operations Division

SE-331:Travaglini

Enclosure:
Part A Permit Application

cc w/o encl.:
Mike Moschell, OEPA, Logan
Bob Anderson, X-100, GAT

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

July 6, 1984

Mr. Dan Banaszec
RCRA Activities
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Post Office Box A 3587
Chicago, Illinois 60690

→OH7 890008983 NOT-1
OH6 890 008 976 NOT-1

Dear Mr. Banaszec:

PART A PERMIT APPLICATIONS

On April 13, 1984, the U.S. District Court for the Eastern District of Tennessee ruled that non-radioactive hazardous waste activities at DOE facilities, authorized by the Atomic Energy Act, are regulated by the Resource Conservation and Recovery Act (RCRA).

To initiate the regulatory process, enclosed are Part A Permit Applications for our hazardous waste Treatment, Storage, and Disposal (TSD) facilities at the Portsmouth Gaseous Diffusion Plant. These applications cover existing TSD facilities and any TSD facility under construction. Under construction is defined as any construction project approved as of April 13, 1984.

Also enclosed for your information is a copy of the Part A permit information for radioactive mixed waste facilities at the Portsmouth Gaseous Diffusion Plant and Feed Materials Production Center (FMPC). This information is submitted under the Memorandum of Understanding between DOE and EPA for hazardous waste and radioactive mixed waste management. FMPC does not store, treat, or dispose non-radioactive hazardous waste.

You are invited to visit these facilities to discuss both our hazardous waste and radioactive mixed waste management activities. If you would like to visit the facility or have any questions, please contact Bob Sleeman at (615) 576-0850.

Sincerely,

B. J. Davis

Bobby Joe Davis, Acting Chief
Environmental Protection Branch
Safety and Environmental Control Division

SE-331:Sleeman

Enclosures:
1. Hazardous Permit Appl.
2. Radioactive Info.

cc w/enclosures:
R. M. Spenceley, NLO
N. H. Hurt, GAT
M. R. Theisen, DP-81
H. D. Fletcher, EO-22
J. L. Foutch, CC-10

Department of Energy
Oak Ridge Operations
P. O. Box E
Oak Ridge, Tennessee 37831

April 4, 1984

U.S. Environmental Protection Agency
Region V
ATTN: Mr. Dan Banaszec
RCRA Activities
Post Office Box A 3587
Chicago, Illinois 60690

OH7890008983 G,TRS,TSD
OH6890008976 G,TRS,TSD

Gentlemen:

RCRA PART A PERMIT APPLICATIONS FOR THE PORTSMOUTH GASEOUS DIFFUSION PLANT AND THE FEED MATERIALS PRODUCTION CENTER

The recent Memorandum of Understanding (MOU) between the U.S. Environmental Protection Agency (EPA) and U.S. Department of Energy for hazardous waste and radioactive mixed waste management establishes a program for EPA review of DOE waste management information. To provide you with some initial information on the Portsmouth Gaseous Diffusion Plant and the Feed Materials Production Center, Part A Permit Applications are enclosed for these facilities. Since these applications are provided for information and not to initiate any permit action, the owner and operator certifications are not signed. As implementation guidance on the MOU is developed, we will furnish you additional information.

If you have any questions concerning hazardous waste activities at these facilities, please contact Bob Sleeman at (FTS) 626-0850.

Sincerely,

Robert C. Sleeman

for Bobby Joe Davis, Acting Chief
Environmental Protection Branch
Safety and Environmental Control Division

SE-331:Sleeman

Enclosures:
1. PORTS Permit Application
2. FMPC Permit Application

cc w/o encls:
J. K. Bland, EPA-IV
M. R. Theisen, DP-81
H. D. Fletcher, EO-22
J. L. Foutch, CC-10

4/9/84
EPA RAIU

OH 7890008983

Smith

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DEC 1 1982

WASTE MANAGEMENT BRANCH
EPA, REGION V

NOV 18 1982

Department of Energy
Oak Ridge Operations
P.O. Box E
Oak Ridge, Tennessee 37830

Non-handler (inactive ID #
3/14/84

RCRA Activities
U.S. EPA Region V
Post Office Box A 3587
Chicago, IL 60690-3587

Gentlemen:

TSD NOTIFICATION WITHOUT PART A APPLICATION, FEED MATERIALS PRODUCTION CENTER, FERNALD, OHIO (~~ID#OH6890008976~~) AND PORTSMOUTH GASEOUS DIFFUSION PLANT, PIKETON, OHIO (~~ID#OH7890008983~~)

We are in receipt of your September 28, 1982, letters concerning the lack of Part A submittals for the subject Department of Energy facilities. As discussed with Ms. Bloom of your staff, by Mr. Chris Bird, on October 18, 1982, Part A applications were not submitted for these facilities (after the August 1980 TSD Notifications for the same facilities) because of subsequent guidance from our Headquarters in Washington, D.C. that determined these facilities to be exempt from EPA regulation as authorized by RCRA. This exemption is provided for by Section 1006(a) of RCRA, which states, in part, "Nothing in this act shall be construed to apply to ....any activity or substance which is subject to ....Atomic Energy Act of 1954, except to the extent that such application (or regulation) is not inconsistent with the requirements of such Act." It is the Department of Energy position that this provision excludes any Atomic Energy Act activity from regulation under RCRA. The propriety of this interpretation is currently being verified in correspondence between DOE and EPA Headquarters.

Therefore, Part A applications for the subject facilities conducting activities authorized by the Atomic Energy Act were not submitted. If you have any further questions, please contact Chris Bird of my staff at FTS 626-0847.

Sincerely,

J. F. Wing

J. F. Wing, Chief
Environmental Protection Branch
Safety and Environmental
Control Division

SE-331:CB

CC:
V. J. D'Amico, SE-30
J. L. Foutch, CC-10
H. Doran Fletcher, EO-22
H. D. Hickman, DP-80

ORIGINAL

...e print or type in the unshaded areas only
...in areas are spaced for elite type, i.e., 12 c... inch)

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

EPA

ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F OH7890008983 D

GENERAL INSTRUCTIONS

...ntified label has been provided, affix ...esignated space. Review the inform...fully; if any of it is incorrect, cross ... and enter the correct data in the ...e fill—in area below. Also, if any of ...ired data is absent *(the area to the ...e label space lists the information ...ld appear)*, please provide it in the ...l—in area(s) below. If the label is ...ect and correct, you need not complete III, V, and VI *(except VI-B which ...must be completed regardless)*. Complete all ...e label has been provided. Refer to ...ctions for detailed item descrip... for the legal authorizations under ...data is collected.

I. EPA I.D. NUMBER: OH7890008983

III. FACILITY NAME: US DOE - Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Post Office Box 2001
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION: 3930 U.S. Route 23 South
Piketon, Ohio 45661

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: USDOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 MA TRAVAGLINI ENV ENGINEER	615 576 0848

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3 PO BOX 2001 ENV. PROTECT. DIV.	4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME
5 3930 US ROUTE 23 SOUTH	PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

9-9-88

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

US DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? ☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 615 576 0848

E. STREET OR P.O. BOX

PO BOX 2001 ENV PROTECT DIV

F. CITY OR TOWN	G. STATE	H. ZIP CODE
OAK RIDGE	TN	37831

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
N 0 I 0 0 0 0 0 0 * B D	P

B. UIC (Underground Injection of Fluids)	E. OTHER (specify)	(specify)
U	88-012	Ohio Solid Waste Permit for Disposal

C. RCRA (Hazardous Wastes)	E. OTHER (specify)	(specify)
R OH7890008983		

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954. The plant enriches uranium for national defense and for commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235. Ancillary processes, systems, and operations serving the enrichment process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment plant, laboratories maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Dr. Ronald O. Hultgren, Director Enriching Operations Division	for [signature]	9/9/88

COMMENTS FOR OFFICIAL USE ONLY

C

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characte h).

Approved OMB No. 158-S80004

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

EPA I.D. NUMBER

F	O	H	7	8	0	0	0	8	9	8	3	T/A	1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C	YR.	MO.	DAY
8	5 5	0 1	1 4

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP T/A 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G		5	D 8 0	44.5	A	
X-2	T 0 3	20	E		6	T 0 3	0.31	D	
1	S 0 1	100,000	G		7	S 0 1	1.0×10^6	G	
2	S 0 4	4.2×10^6	G		8	S 0 1	17,000	G	
3	T 0 2	35,000	U		9	S 0 2	18,000	G	
4	D 8 1	0.71	B		10				

Continued from the front

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04") FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility-estimated capacity 110 208-liter (55 gallon) drums within the contained area (i.e., liquid wastes) and estimated 2200 drums or 500 1-cubic yard polyethylene containers
2. X-616 Chromium Sludge Lagoons (volume adjusted to include North Lagoon)
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plot
5. X-749 Contaminated Materials Disposal Facility
6. X-705A Radicator
7. X-744G Non-UESA Bulk Storage Building
8. X-326 Waste Storage Facility
9. Storage tank for Chromic Cleaning Solution, X-700 Building

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1), and (3) Enter in the space provided on page 4 the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: **HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER** — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

...ued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY											
W	O	H	7	8	9	0	0	0	8	9	8	3	T/A	C	W	DUP					T/A	C	DUP	
														1								2		

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D001	23,200	P	S01	
2	F001	2,400	P	S01	
3	D001	4,000	P	S01	
4	D008	1,000			
5	U196	400	P	S01	
6	F007	400	P	S01	
7	U140	2,000*	P	S01	
8	U197				
9	U169				
10	U077				
11	U080				
12	U131				
13	U112				
14	U019				
15	U159				
16	U201				
17	U353				
18	U350				
19	U211				
20	U123				
21	D006	90,000	P	S01	
22	D008				
23	D007	1,000	T	S04	
24	D002	1,000	P	T02	
25	D006	40,000	P	D80	
26	D008				

EPA Form 3510-3 (6-80)

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...ued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): WOH7890008983

FOR OFFICIAL USE ONLY: W DUP T/A C 2 DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D001	3,200	P	T03	
2		20,000	P	S01	
3		12,000	P	S01	
4	D005	1,500	P	S01	
5	D006				
6	D001	500	G	S01	
7	F002	12,000	P	S01	
8	F003	2,500	P	S01	
9	F005	1,000	P	S01	
10	D008	5,000	P	S01	
11	D002	0*		S02	
12	D007				
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

													T/A	C
F	0	H	7	8	9	0	0	0	8	9	8	3		6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
35 00 03.7	084 00 02.8

VIII. FACILITY OWNER

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

E. NAME OF FACILITY'S LEGAL OWNER	F. PHONE NO. *(area code & no.)*
U.S. Department of Energy	615-576-0848

F. STREET OR P.O. BOX	G. CITY OR TOWN	H. ST.	I. ZIP CODE
P. O. Box E	Oak Ridge	TN	37831

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
Dr. Ronald O. Hultgren, Director Enriching Operations Division	for Thomas P. Hultgren	9/9/85

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
Dr. Ronald O. Hultgren, Director Enriching Operations Division	for Thomas P. Hultgren	9/9/85

US EPA PART A, FORM 3

ATTACHMENT I

Page 3A of 5

1. Includes miscellaneous laboratory solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3,4. Paint spray booth wastes have EPA waste codes D001 and D008.

7-20. Miscellaneous small quantity laboratory chemicals.

21,22. Metals sludge from raffinate treatment process.

25,26. Metals sludge from raffinate treatment buired in X-749 Contaminated Materials Disposal Facility (8/84 - 6/85).

Page 3B of 5

1. Flammable solvents mixed with burnable solids and incinerated in X-705A Radicator (8/85 - 4/86).

2. Miscellaneous dreid sludges from small parts and handtable decontamination operations. Commonly referred to as "gunk".

3,4. Ash from incineration of contaminated burnables.

5. Flammable mixed wastes (various assays).

6. Mixed wastes (various assays) - EP Toxic waste.

11,12. Chromic Cleaning Solution (mixture of sodium dichromate and sulfuric acid).

EPA

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F OH7890008983

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is completely and correctly, you need not complete items I, III, V, and VI (except VI-B on which you must be completed regardless). Complete items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

GENERAL

I. EPA I.D. NUMBER: OH7890008983

III. FACILITY NAME: U.S. DOE - Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION: 3930 U.S. Route 23 South
Piketon, Ohio 45661

FEB 16 1988

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will the facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 USDOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 MA TRAVAGLINI ENV ENGINEER	615 576 0848

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 PO BOX E ENV PROTECT DIVISION

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 3930 U.S. ROUTE 23 SOUTH

B. COUNTY NAME

PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

EPA Form 3510-1 (6-80)

2-11-88

A. FIRST

2 8 1 9 (specify) Industrial Inorgani emicals

B. SECOND

7 (specify)

C. THIRD

(specify)

D. FOURTH

7 (specify)

III. OPERATOR INFORMATION

A. NAME

U S D E P A R T M E N T O F E N E R G Y

B. Is the name listed in Item A also the owner? ☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL M = PUBLIC (other than federal or state) S = STATE C = OTHER (specify) P = PRIVATE

F (specify)

D. PHONE (area code & no.)

A . 6 1 5 5 7 6 0 8 4 8

E. STREET OR P.O. BOX:

P O B O X E E N V I R O N M T P R O T D I V

F. CITY OR TOWN

O A K R I D G E

G. STATE

T N

H. ZIP CODE

3 7 8 3 1

IX. INDIAN LAND

Is the facility located on Indian land? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)

N O H 0 0 0 6 0 9 2

B. PSD (Air Emissions from Proposed Sources)

9 P

C. UIC (Underground Injection of Fluids)

9 U

E. OTHER (specify)

8 4 - 0 1 9 (specify) Ohio Solid Waste Disposal Licence

F. RCRA (Hazardous Wastes)

9 R O H 7 8 9 0 0 0 8 9 8 3

G. OTHER (specify)

9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954. The plant enriches uranium for national defense and commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235. Ancillary processes, systems, and operations serving the uranium process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment system, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Joe W. Parks, Director Enriching Operations Division	J W Parks	FEB 1-1 1988

COMMENTS FOR OFFICIAL USE ONLY

EPA Form 3510-1 (6-80) REVERSE

Please print or type in the unshaded areas only (fill—in areas are spaced for elite type, i.e., 12 characters/inch)

Form Approved OMB No. 158-S80004

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F | O H 7 8 9 0 0 3 9 8 1 0

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

C: 8 | YR.: 5 5 | MO.: 0 1 | DAY: 1 4

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

[ ] 2. NEW FACILITY *(Complete item below.)*

YR. | MO. | DAY

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. **AMOUNT** — Enter the amount.
2. **UNIT OF MEASURE** — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C | DUP | T/A C: 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G	
X-2	T 0 3	20	E	
1	S 0 1	100,000	G	
2	S 0 4	4.2×10^6	G	
3	T 0 2	35,000	U	
4	D 8 1	0.71	B	
5	D 8 0	44.5	A	
6	T 0 3	0.31	D	
7	S 0 1	1.0×10^6	G	
8	S 0 1	17,000	G	
9	S 0 3	800	Y	
10				

Continued from the front

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES (code 'T0') FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY

1. X-752 Hazardous Waste Storage Facility- estimated capacity 110 208-liter (55-gallon) drums within the contained area (i.e., liquid wastes) and estimated 2200 drums or 500 1-cubic yard polyethylene containers.
2. X-616 Chromium Sludge Lagoons (volume adjusted to include North Lagoon).
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plot
5. X-749 Contaminated Materials Disposal Facility
6. X-705A Radicator
7. X-744G Non-UESA Bulk Storage Building
8. X-326 Waste Storage Facility
9. X-616 Treated Sludge Waste Pile

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** – Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. **PROCESS CODES:**
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K054	900	P	T03 D80	
X-2	D002	400	P	T03 D80	
X-3	D001	100	P	T03 D80	
X-4	D002				included with above

Continued from page 2
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY			
[illegible]0E7890008963	W	DUP	2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D001	23,200	P	S01	
2	F001	2,400	P	S01	
3	D001	4,000	P	S01	
4	D008	1,000			
5	U196	400	P	S01	
6	F007	400	P	S01	
7	U140	2,000*	P	S01	
8	U197				
9	U160				
10	U077				
11	U080				
12	U131				
13	U112				
14	U019				
15	U159				
16	U201				
17	U353				
18	U350				
19	U211				
20	U123				
21	D006	90,000	P	S01	
22	D008				
23	D007	1,000	T	S04	
24	D002	1,000	P	T02	
25	D006	40,000	P	D80	
26	D008				

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

EPA I.D. NUMB (enter from page 1)

FOR OFFICIAL USE

W DUP DUP

IV DESCRIPTIO OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D 0 0 1	3,200	P	T 0 3	
2		20,000	P	S 0 1	
3		12,000	P	S 0 1	
4	D 0 0 5	1,500	P	S 0 1	
5	D 0 0 6				
6	D 0 0 1	500	G	S 0 1	
7	F 0 0 2	22,000		S 0 1	
8	F 0 0 3	2,500	P	S 0 1	
9	F 0 0 5	1,000	P	S 0 1	
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (Rev.)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F | O | H | 7 | 8 | 9 | 0 | 0 | 0 | 8 | 9 | 8 | 3 | 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 037	088 00 028

VIII. FACILITY OWNER

☐ **A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.**

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

	1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	U. S. Department of Energy	615-576-0[illegible]

	3. STREET OR P.O. BOX		4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	P. O. Box E	G	Oak Ridge	TN	37831

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Joe W. Parks, Director Enriching Operations Division	J W Parks	FEB 11 1988

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Joe W. Parks, Director Enriching Operations Division	J W Parks	FEB 11 1988

CONTINUE ON PAGE 5

Page 3A of 5

1. Includes miscellaneous laboratory solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3,4. Paint spray booth wastes have EPA waste codes D001 and D008.

7-20. Miscellaneous small quantity laboratory chemicals.

21,22. Metals sludge from raffinate treatment process.

25,26. Metals sludge from raffinate treatment buried in X-749 Contaminated Materials Disposal Facility (8/84 - 6/85).

Page 3B of 5

1. Flammable solvents mixed with burnable solids and incinerated in X-705A Radicator (8/85 - 4/86).

2. Miscellaneous dried sludges from small parts and hand-table decontamination operations. Generally referred to as "gunk".

3,4. Ash from incineration of contaminated burnables.

5. Flammable mixed wastes (various assays).

6. Mixed wastes (various assays)-waste may be EP Toxic Testing Program underway.

Please print or type in the unshaded areas only (fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER
F OH7890008983

LABEL ITEMS

I. EPA I.D. NUMBER OH7890008983

III. FACILITY NAME U.S. DOE - Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS
U.S. Department of Energy
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION
3930 U.S. Route 23 South
Piketon, Ohio 45661

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP USDOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 MA TRAVAGLINI ENV ENGINEER	615 576 0848

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 PO BOX E ENV PROTECT DIVISION

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 3930 U.S. ROUTE 23 SOUTH

B. COUNTY NAME

PIKE

11-30-87

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	7 (specify)
C. THIRD	**D. FOURTH**
7 (specify)	7 (specify)

II. OPERATOR INFORMATION

A. NAME

US DEPARTMENT OF ENERGY

B. Is this name also the facility's owner? ☐ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL; M = PUBLIC (other than federal or state); S = STATE; O = OTHER (specify); P = PRIVATE

F (specify)

D. PHONE (area code)

A 615 576 8

E. STREET OR P.O. BOX:

O BOX E ENVIRONMT PROT DIV

F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
OAK RIDGE	TN	37831	Is the facility located on Indian land? ☐ YES ☒ NO

III. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
N OH0006092	9 P

B. UIC (Underground Injection of Fluids)	E. OTHER (specify)
U	9 84-019 (specify) Ohio Solid Waste--Disposal License

C. RCRA (Hazardous Wastes)	F. OTHER (specify)
R OH7890008983	9 (specify)

IV. MAP

Attach to this application a topographic map of the area extending at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intakes and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

V. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954. The plant enric uranium for national defense and commercial nuclear reactors. Commercial reactors ar fueled with uranium containing from two to four percent uranium-235. Ancillary proces systems, and operations serving the uranium process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment system, lab atories, maintenance shops, and other facilities.

VI. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
for Joe W. Parks, Director Enriching Operations Division		11/30/87

COMMENTS FOR OFFICIAL USE ONLY

EPA Form 3510-1 (6-80) REVERSE

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 char /inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F	O	H	7	8	9	0	0	0	8	9	8

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facil... a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your f... EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item b...*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C	YR.	MO.	DAY
8	5 5	0 1	1 4

FOR NEW FA... PROVIDE TH... (yr., mo., & day... TION BEGAN ... EXPECTED TO...

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provide... entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below,... describe the process *(including its design capacity)* in the space provided on the form *(Item III-C).*

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	P
ACRES	B
HECTARES	C

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below):* A facility has two storage tanks, one tank can hold 200 gallons and th... other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C	DUP	P/A	C
			1

LINE NUMBER	A. PROCESS CODE (From list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (From list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	OF...
X-1	S 0 2	600	G		5	D 8 0	44.5	A	
X-2	T 0 3	20	E		6	T 0 3	0.31	D	
1	S 0 1	100,000	G		7	S 0 1	1.0×10^6	G	
2	S 0 4	4.2×10^6	G		8	S 0 1	17,000	G	
3	T 0 2	35,000	U		9	S 0 3	800	Y	
4	D 8 1	0.71	B		10				

Continued from the front

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility- estimated capacity 110 208-liter (55-gallon) drums within the contained area (i.e., liquid wastes) and estimated 2200 drums or 500 1-cubic yard polyethylene containers.
2. X-616 Chromium Sludge Lagoons, (volume adjusted to include North Lagoon).
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plot
5. X-749 Contaminated Materials Disposal Facility
6. X-705A Radicator
7. X-744G Non-UESA Bulk Storage Building
8. X-326 Waste Storage Facility
9. X-616 Treated Sludge Waste Pile

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the wastes.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

...ued from page 2.
NOTE Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80...

EPA I.D. NUMBER (enter from page 1): W O H 7 8 0 0 0 8 9 8 3 — T/A: 1 — C:

FOR OFFICIAL USE ONLY: W — DUP — T/A: 2 — C: DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	23,200	P	S01	
2	F001	2,400	P	S01	
3	D001	4,000	P	S01	
4	D008	1,000			
5	U196	400	P	S01	
6	F007	400	P	S01	
7	U140	2,000*	P	S01	
8	U197				
9	U169				
10	U077				
11	U080				
12	U131				
13	U112				
14	U019				
15	U159				
16	U201				
17	U353				
18	U350				
19	U211				
20	U123				
21	D006	90,000	P	S01	
22	D008				
23	D007	1,000	T	S04	
24	D002	1,000	P	T02	
25	D006	40,000	P	D80	
26	D008				

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY
W I D E 7 8 9 0 0 0 8 9 8 3	W DUP DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	3,200	P	T03	Mixed Wastes
2		12,000	P	S01	Possible Mixed Waste
3	D005	1,500	P	S01	Mixed Wastes
4	D006				
5	D001	500	G	S01	Mixed Wastes
6	D002	500	G	S01	Mixed Wastes
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

1	0	H	7	8	9	0	0	0	8	9	8	3	6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
35 ° 00 ' 37 "	084 ° 00 ' 28 "

VIII. FACILITY OWNER

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
U. S. Department of Energy	615-576-0841

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
P. O. Box E	C G Oak Ridge	TN	37831

X. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Joe W. Parks, Director Enriching Operations Division		11/30/89

XI. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Joe W. Parks, Director Enriching Operations Division		11/30/89

US EPA PART A, FORM 3

ATTACHMENT I

Page 3A of 5

1. Includes miscellaneous laboratory solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3,4. Paint spray booth wastes have EPA waste codes D001 and D008.

7-20. Miscellaneous small quantity laboratory chemicals.

21,22. Metals sludge from raffinate treatment process.

25,26. Metals sludge from raffinate treatment buried in X-749 Contaminated Materials Disposal Facility (8/84 - 6/85).

Page 3B of 5

1. Flammable solvents mixed with burnable solids and incinerated in X-705A Radicator (8/85 - 4/86).

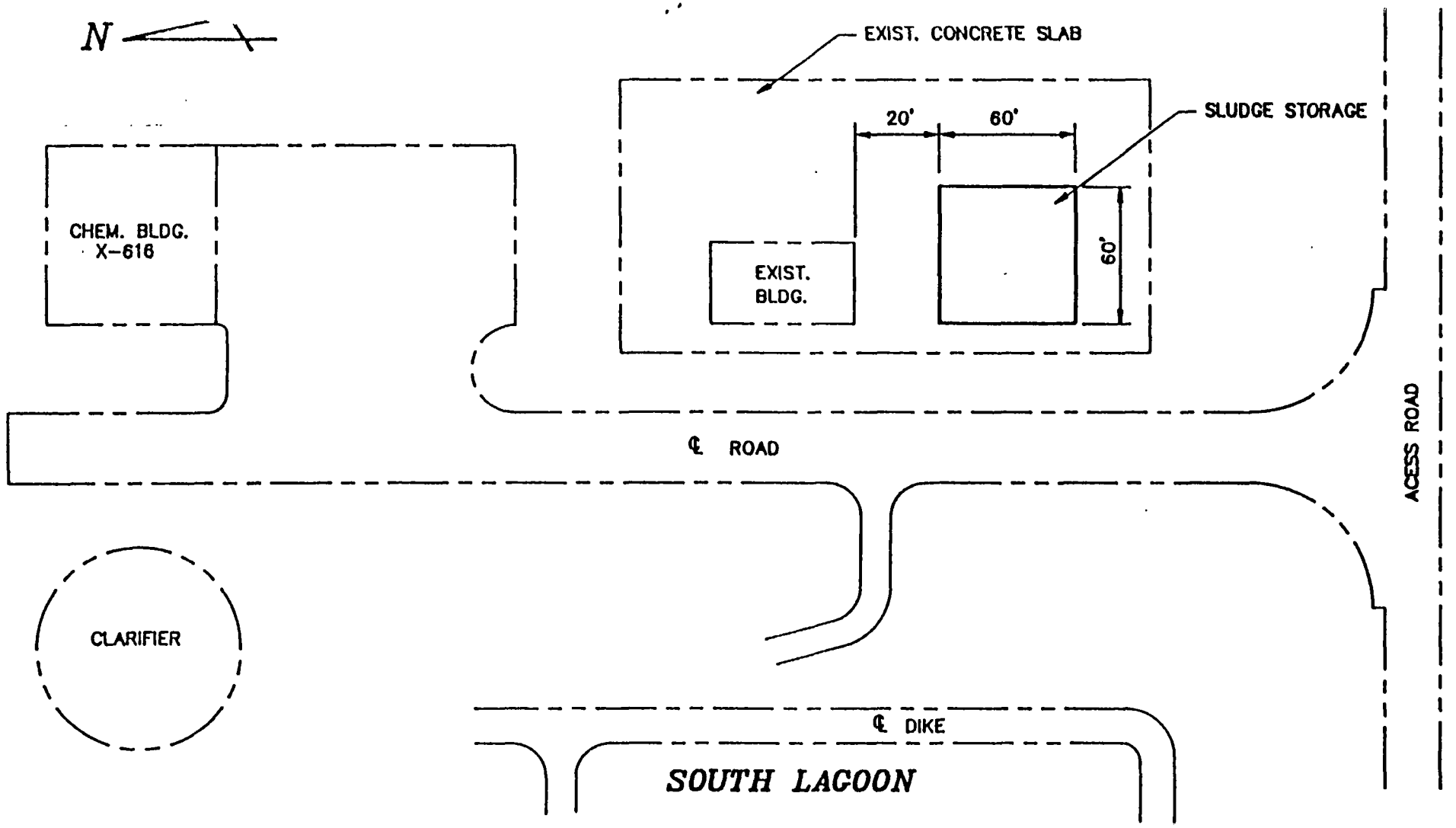
2. Miscellaneous dried sludges from small parts and hand-table decontamination operations. Generally referred to as "gunk".

3,4. Ash from incineration of contaminated burnables.

5. Flammable mixed wastes (various assays).

6. Mixed wastes (various assays)-waste may be EP Toxic Testing Program underway.

Part A Application
Form 3
Enclosure II



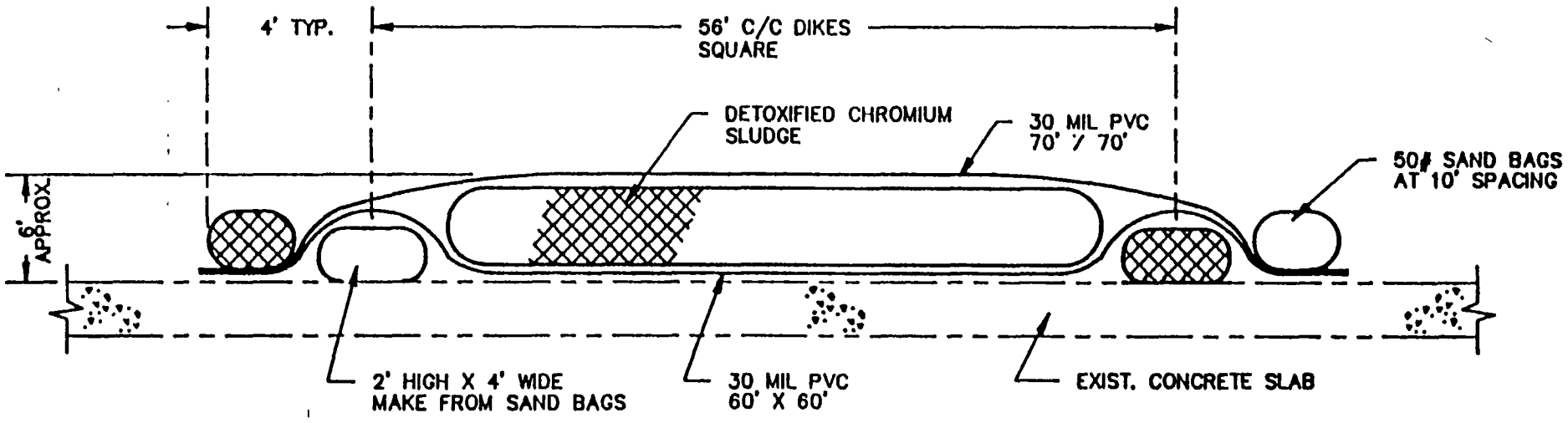
PARTIAL PLAN

NTS

X-616 FACILITY

DWN. R.R. McROBERTS 11/10/87

ENGR. J.M. HORTEL 11/10/87



CROSS-SECTION THROUGH INTERIM STORAGE

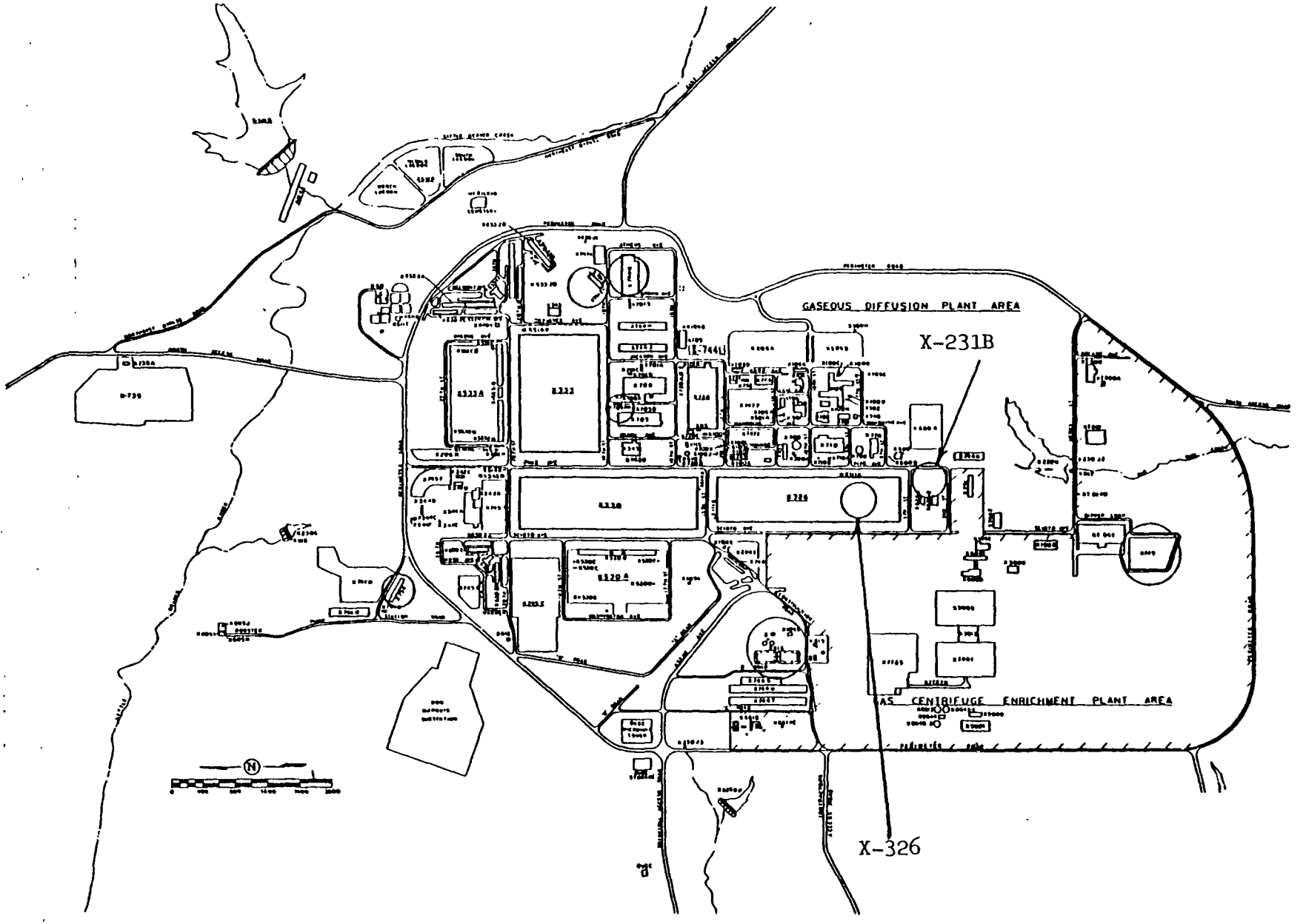
APPROX. STORAGE CAPACITY 20,000CF

X-616 FACILITY

DWN. R.R. McROBERTS ***11/10/8***

ENGR. J.M. HORTEL ***11/10/8***

Part A Application
Form 3
Attachment III



X-SITE BUILDING INDEX MAP

Attachment 2

Part A Application

There are several changes to the Part A Permit Application as a result of the request for the interim status change. All of the changes are on Form 3 of the application and are as noted below:

1. Sect. III, line 2 - The capacity of the surface impoundment(s) has been doubled to reflect the addition of the North Lagoon.

2. Sect. III, line 8 - The total design capacity of the X-326 Waste Storage Facility is depicted. It should be noted that, at any given time, a large percentage of the capacity may be taken up by nonhazardous materials.

3. Sect. III, line 9 - The volume of the waste pile created by the treatment and dewatering of chromium sludge is estimated to be 800 cubic yards.

4. Sect. IV, page 3B of 5 - Twenty thousand (20,000) pounds of containerized material was removed from line 2. This quantity represented chemical trap material which has been found to be nonhazardous. The twelve thousand (12,000) pounds (now shown in line 2) represents a mixed waste called "gunk" and test results are not yet available.

5. Sect. IV, page 3B of 5 - Lines 3 and 4 represents incinerator ash from contaminated burnables. Currently, there is no ash in inventory and none is being generated due to the incinerator being shut down.

6. Sect. IV, page 3B of 5 - Line 6 represents waste streams referred to as lab acids, carbonate solutions, and other aqueous solutions. An estimated 30 % to 50 % of the lab acids are hazardous by virtue of the pH being less than 2.0. Laboratory tests are underway on representative samples of all solutions to determine if other hazardous characteristics are present.

X-616 Chromium Sludge North Impoundment

In December 1985, a misvalving incident caused an undetermined amount of chromium sludge to be discharged into the X-616 North Impoundment instead of the South Impoundment per normal operations. Subsequently, samples were collected from the bottom of the north impoundment and analyzed using US EPA approved protocol for EP Toxicity. The were found to be EP Toxic by virtue of exceeding the regulatory limits for chromium in leachate from the samples.

For this reason, US DOE requests that the status of the North Impoundment be changed to the storage of an EP Toxic sludge. The North Impoundment is not intended to be used for the storage of any additional sludge, therefore, the volume in storage will not be increased at any future date. However, it should be pointed out that, due to closure activities beginning in the spring of 1988, the North Impoundment will not be entered into the Part B Permit Application. For that reason, certain RCRA required activities, e.g., engineering certification of the dike walls, will not be performed. Other activities, such as inspections and security measures, are in place or will be initiated immediately.

X-616 Treated Sludge Waste Pile

On May 22, 1987, DOE-ORO sent a letter to US EPA, Region V, and OEPA requesting a Change in Interim Status for the X-616 Chromium Sludge Lagoon. The request was to allow the treatment of a portion of the sludge to render it nonhazardous and subsequently bury the resultant sludge cake in the X-735 Sanitary Landfill. In a letter dated October 13, 1987, US EPA approved the treatment process, but required that approval from OEPA be obtained prior to beginning any treatment.

Since the request for treatment was submitted, US DOE has become aware that the chromium sludge contains low concentrations of hazardous constituents, specifically, halogenated solvents. Both US EPA and OEPA were subsequently made aware of the presence of the solvents in the sludge. Because of this contamination, OEPA has not yet determined the status of the treated sludge waste pile; they consider the sludge may be a listed hazardous waste. A final resolution is pending. The US DOE position is that the material is nonhazardous for two reasons; first, the TCLP tests performed on the sludge indicated solvent concentrations below significance levels and second, the waste stream entering the X-616 treatment facility is specifically exempted from RCRA regulatory authority.

However, a Change of Interim Status is requested to allow the formation of a hazardous waste pile. It should be noted that, once a final regulatory determination is made, the waste pile may be removed from the Part A application. At this time, indications are that OEPA will exempt the waste pile from the Part B permitting process, however, certain aspects of the RCRA regulations are to be followed, e.g., inspections, security requirements, etc. Ohio EPA (Ed Kitchen) has discussed this action with US EPA (George Hamper).

X-326 Mixed Waste Storage Area

The X-326 Mixed Waste Storage Area is currently being upgraded to meet the RCRA standards for a hazardous waste storage area. The waste to be stored in this area are classified as mixed wastes, i.e., having radioactive and hazardous characteristics. The justification for requesting the change is partially due to the Final Interpretative Rule regarding by-product material. However, this request is for an additional storage capacity due to recent changes in Department of Energy requirements concerning security measures for storage of specified levels of radioactively contaminated wastes. The X-326 Storage Area provides the necessary level of security protection.

All aspects of the RCRA regulations will be met. As stated, the physical facilities are being upgraded to meet RCRA standards. Inspections, operating records, and other required aspects of RCRA will be implemented as soon as possible. Inspections of the facility and the reasons for requesting the new area are available to EPA personnel with the appropriate authorization from DOE security.

Please print or type in the unshaded areas only
(shaded areas are spaced for elite type, i.e., 12 characters/inch)

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F O H 7 8 0 0 0 8 9 8 3 D

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER: OH7890008983

III. FACILITY NAME: U.S. DOE - Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION: 3930 U.S. Route 23 South
Piketon, Ohio 45661

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: U S D O E P O R T S M O U T H G A S E O U S D I F F U S I O N P L A N T

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 M A T R A V A G L I N I E N V E N G I N E E R	6 1 5 5 7 6 0 8 4 8

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 P O B O X E E N V P R O T E C T D I V I S I O N

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 O A K R I D G E	T N	3 7 8 3 1

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 5 3 9 3 0 U . S . R O U T E 2 3 S O U T H

B. COUNTY NAME: P I K E

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 P I K E T O N	O H	4 5 6 6 1	

EPA Form 3510-1 (6-80)

CONTINUE ON REVERSE

7-1-87

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

US DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? ☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 615 576 0848

E. STREET OR P.O. BOX:

PO BOX E ENVIRONMT PROT DIV

F. CITY OR TOWN | **G. STATE** | **H. ZIP CODE** | **IX. INDIAN LAND**

B OAK RIDGE | TN | 37831 | Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N OH0006092	9 P

B. UIC (Underground Injection of Fluids)	E. OTHER (specify)	
9 U	9 84-019	(specify) Ohio Solid Waste Disposal License

C. RCRA (Hazardous Wastes)	E. OTHER (specify)	
9 R OH7890008983	9	(specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954. The plant enriches uranium for national defense and commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235. Ancillary processes, systems, and operations serving the uranium process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment system, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
J. C. Hall, Acting Director Enriching Operations Division		7/18/87

COMMENTS FOR OFFICIAL USE ONLY

C

Form Approved OMB No. 158-S80004

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☐ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

YR.	MO.	DAY
55	01	14

☐ 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR OR GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	A
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	G

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G		5	D80	44.5		
X-2	T03	20	E		6	T03	0.31		
1	S01	100,000	G		7	S01	1.0×10^6	G	
2	S04	2.1×10^6	G		8				
3	T02	35,000	U		9				
4	D81	0.71			10				

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T[illegible]" FOR EACH PROCESS ENTERED HERE. INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility - estimated capacity 110 208-liter (55-gallon) drums within the contained area (i.e., liquid wastes) and estimated 2200 drums or 500 1-cubic yard polyethylene containers.
2. X-616 Chromium Sludge Lagoon
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plot
5. X-749 Contaminated Materials Disposal Facility
6. X-705A Radicator
7. X-744G Non-UESA Bulk Storage Building

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K054	900	P	T03 D80	
X-2	D002	400	P	T03 D80	
X-3	D001	100	P	T03 D80	
X-4	D002				included with above

Continued from page 2.
NOTE. Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved. OMB No. 158-S80003

EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
W D H 7 8 9 0 0 0 8 9 8 3	T/A C 1	W DUP	T/A C 2 DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	23,200	P	S01	
2	F001	2,400	P	S01	
3	D001	4,000	P	S01	
4	D008	1,000			
5	U196	400	P	S01	
6	F007	400	P	S01	
7	U140	2,000*	P	S01	
8	U197				
9	U169				
10	U077				
11	U080				
12	U131				
13	U112				
14	U019				
15	U159				
16	U201				
17	U353				
18	U350				
19	U211				
20	U123				
21	D006	90,000	P	S01	
22	D008				
23	D007	1,000	T	S04	
24	D002	1,000	P	T02	
25	D006	40,000	P	D80	
26	D008				

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

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NOTE: Photocopy thi... page before completing if ...ave more than 26 wastes to list.

Form Approved OMB No. 158-S800

EPA I.D. NUMBER (enter from page 1)														FOR OFFICIAL USE ONLY											
												T/A	C											T/A	C
W	O	H	7	8	9	0	0	0	8	9	8	3		1	W				D	U	P			2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	3,200	P	T03	
2		20,000	P	S01	
3		12,000	P	S01	
4	D005	1,500	P	S01	
5	D006				
6	D001	500	G	S01	
7					
8					
9					
10					
11					
12					
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14					
15					
16					
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18					
19					
20					
21					
22					
23					
24					
25					
26					

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F	0	H	7	8	9	0	0	0	8	9	8	3	T/A	6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 037	088 00 028

VIII. FACILITY OWNER

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E U.S. DEPARTMENT OF ENERGY	615-576-0848

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F P. O. Box E	G Oak Ridge	TN	37831

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
J. C. Hall, Acting Director Enriching Operations Division	Maurice Kendrick	7/1/89

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
J. C. Hall, Acting Director Enriching Operations Division	Maurice Kendrick	7/1/89

US EPA PART A, Form 3
Attachment I

Page 3A of 5

1. Includes miscellaneous laboratory solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3,4. Paint spray booth wastes have EPA waste codes D001 and D008.

7-20. Miscellaneous small quantity laboratory chemicals.

21,22. Metals sludge from raffinate treatment process.

25,26. Metals sludge from raffinate treatment buried in X-749 Contaminated Materials Disposal Facility (8/84 - 6/85).

Page 3B of 5

1. Flammable solvents mixed with burnable solids and incinerated in X-705A Radicator (8/85 - 4/86).

2. Spent chemical trap material consisting of alumina (aluminum oxide), magnesium fluoride, and/or sodium fluoride. Used for the removal of radioactive materials from process vents.

3. Miscellaneous dried sludges from small parts and hand-table decontamination operations. Generally referred to as "gunk".

4,5. Ash from incineration of contaminated burnables.

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 chara /inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER	OH7890008983
III. FACILITY NAME	U.S. DOE - Portsmouth Uranium Enrichment Complex
V. FACILITY MAILING ADDRESS	U.S. Department of Energy Post Office Box E Oak Ridge, Tennessee 37831
VI. FACILITY LOCATION	U.S. Route 23, South Piketon, Ohio 45661

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: U.S. DOE PORTSMOUTH URANIUM ENRICHMT CMPLX

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 TRAVAGLINI MA ENV ENGINEER	615 576 0845

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 POBOX E ENVIRONMT PROT DIV

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 U.S. ROUTE 23 SOUTH

B. COUNTY NAME

PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

11/25/86

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

US DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 615 576 0840

E. STREET OR P.O. BOX

P O B O X E E N V I R O N M T P R O T B R A N C H

F. CITY OR TOWN

O A K R I D G E

G. STATE TN

H. ZIP CODE 37831

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	B. PSD (Air Emissions from Proposed Sources)
N OH0006092	P
B. UIC (Underground Injection of Fluids)	**C. OTHER (specify)**
U	84-019 (specify) Ohio Solid Waste Disposal License
D. RCRA (Hazardous Wastes)	**E. OTHER (specify)**
R OH7890008983	(specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intakes and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Uranium Enrichment Complex has been operating since 1954. The plant enriches uranium for national defense and commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235 (U-235). Ancillary processes, systems, and operations serving the uranium process include a cooling water system, a sanitary water system, a sewage system, a steam plant, a nitrogen manufacturing plant, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	11/25/86

COMMENTS FOR OFFICIAL USE ONLY

C

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

EPA

U. S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER: F O H 7 8 9 0 0 0 8 9 8 3 | 1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*: 8 | 5 5 (YR.) | 0 1 (MO.) | 1 4 (DAY)

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN: (YR.) | (MO.) | (DAY)

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[X] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. **PROCESS CODE** – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. **PROCESS DESIGN CAPACITY** – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	P
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G		5	D80	44.5	A	
X-2	T03	20	E		6				
1	S01	100,000	G		7				
2	S04	2.1×10^6	G		8				
3	T02	35,000	U		9				
4	D81	0.71	B		10				

DUP | T/A: C | 1

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility; estimated capacity 110 208-liter (55-gallon) drums within the contained area (for liquid wastes) and an estimated 2200 drums or 500 1-cubic yard polyethylene containers.
2. X-616 Chromium Sludge Lagoon
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plots (Currently undergoing closure)
5. X-749 Contaminated Materials Disposal Facility

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on the line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY
W O H 7 8 9 0 0 0 8 9 8 3 — T/A: 1	W — DUP — T/A: 2 — DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D 0 0 1	23,200	P	S 0 1	
2	F 0 0 1	2,400	P	S 0 1	
3	D 0 0 1	4,000	P	S 0 1	
4	D 0 0 8	1,000			
5	U 1 9 6	400	P	S 0 1	
6	F 0 0 7	400	P	S 0 1	
7	U 1 4 0	2,000*	P	S 0 1	
8	U 1 9 7				
9	U 1 6 9				
10	U 0 7 7				
11	U 0 8 0				
12	U 1 3 1				
13	U 1 1 2				
14	U 0 1 9				
15	U 1 5 9				
16	U 2 0 1				
17	U 3 5 3				
18	U 3 5 0				
19	U 2 1 1				
20	U 1 2 3				
21	D 0 0 6	90,000	P	S 0 1	
22	D 0 0 8				
23	D 0 0 7	1,000	T	S 0 4	
24	D 0 0 2	1,000	P	T 0 2	
25	D 0 0 6	48,000	P	D 8 0	
26	D 0 0 8				

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "1A", "1B", "1C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)														
F	0	H	7	8	9	0	0	8	9	8	3	T/A	C	6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 037	088 00 028

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	11/25/86

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	11/25/86

USEPA PART A, FORM 3

ATTACHMENT I

1. Includes miscellaneous lab solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3, 4. Paint spray booth wastes have EPA hazard codes D001 and D008.

7-20 Includes miscellaneous small quantities of laboratory chemicals. The amount and type vary from year to year.

21,22 Radioactive and hazardous mixed waste metals sludge. EP toxicity test indicates greater than allowable concentrations of cadmium and lead in the leachate.

25,26 Metals precipitation sludge buried prior to August 25, 1985. Evidence obtained at that time indicates that the sludge buried may have been toxic. Will be presumed to be toxic unless investigation proves otherwise.

Fill-in areas are spaced for elite type, i.e., 12 characters/inch

Form Approved OMB No. 158-R0175

FORM 1 GENERAL — EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F OH7890008983 D

LABEL ITEMS

I. EPA I.D. NUMBER: OH7890008983

III. FACILITY NAME: U.S. DOE - Portsmouth Uranium Enrichment Complex

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION: U.S. Route # 23, South
Piketon, Ohio 45661

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP U.S. DOE PORTSMOUTH URANIUM ENRICHMENT COMPLEX

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 TRAVAGLINI MIKE ENV ENGINEER	615 576 0845

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 P.O. BOX E, ENVIRON. PROTECTION BR

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 5 U.S. ROUTE 23, SOUTH

B. COUNTY NAME: PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

EPA Form 3510-1 (6-80)

4-23-86

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
7 2 8 1 9 (specify) Industrial Inorganic Chemicals	7 (specify)
C. THIRD	**D. FOURTH**
7 (specify)	7 (specify)

VIII. OPERATOR INFORMATION

A. NAME	B. Is the name listed in Item VIII-A also the owner?
8 U S DEPARTMENT OF ENERGY	X YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.): A 6 1 5 5 7 6 0 8 4 8

E. STREET OR P.O. BOX: P O B O X E ENVIRONMT PROT BRANCH

F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
8 O A K R I D G E	T N	3 7 8 3 1	Is the facility located on Indian lands? ☐ YES X NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N O H 0 0 0 6 0 9 2	9 P
E. UIC (Underground Injection of Fluids)	**B. OTHER (specify)**
9 U	9 8 4 - 0 1 9 (specify) Ohio Solid Waste Disposal License
C. RCRA (Hazardous Wastes)	**E. OTHER (specify)**
R O H 7 8 9 0 0 0 8 9 8 3	9 F (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Uranium Enrichment Plant has been operating since 1954. The plant enriches uranium for national defense and commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235 (U-235). Ancillary processes, systems, and operations serving the uranium process include a cooling water system, a sanitary water system, a sewage system, a steam plant, a nitrogen manufacturing plant, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	APR 2 3 1986

COMMENTS FOR OFFICIAL USE ONLY

C6

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U. S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER: F O H 7 8 9 0 0 0 8 9 8 3 (1, C)

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*: C 8 | YR. 5 5 | MO. 0 1 | DAY 1 4

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN: YR. | MO. | DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[X] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. **PROCESS CODE** – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. **PROCESS DESIGN CAPACITY** – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	K

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP (Y/A C I)

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G		5	D80	44.5	A	
X-2	T03	20	E		6				
1	S01	100,000	G		7				
2	S04	2.1×10^6	G		8				
	T02	35,000	U		9				
4	D81	0.71	B		10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES *(code "Y4")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility; estimated capacity 110 208-liter (55-gallon) drums within the contained area (for liquid wastes) and an estimated 2200 drums or 500 1-cubic yard polyethylene containers.
2. X-616 Chromium Sludge Lagoon
3. X-701B Holding Pond
4. X-231B Oil Biodegradation Plots (Currently undergoing closure)
5. X-749 Contaminated Materials Disposal Facility

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** – Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous wastes: For each listed hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Notes: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				*included with above*

...ued from page 2.

NOTE. Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY
0 H 7 8 9 0 0 0 8 9 8 3	W DUP 2 DUP

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D001	23,200	P	S01	
2	F001	2,400	P	S01	
3	D001	4,000	P	S01	
4	D008				
5	U196	400	P	S01	
6	F007	400	P	S01	
7	U140	2,000*	P	S01	
8	D006	90,000*	P	S01	
9	D008				
10	D007	1,000	T	S04	
11	D002	100	P	T02	
12	D006	48,000	P	D80	
13	D008				
14					
15		*See Form 3,			
16		Attachment I.			
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

F: 0 H 7 8 9 0 0 0 8 9 8 3 | T/A: | C: 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground-level)* that clearly delineate all existing structures; existing storage, atment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
3 9 0 0 0 3 7	0 8 8 0 0 0 2 8

VIII. FACILITY OWNER

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*
E: U. S. Department of Energy	6 1 5 - 5 7 6 - 0 8 4 8

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F: P. O. Box E	G: Oak Ridge	T N	3 7 8 3 1

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	APR 2 3 1986

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
W. F. Manning, Director Enriching Operations Division	W F Manning	APR 2 3 1986

USEPA PART A, FORM 3

ATTACHMENT I

1. Includes miscellaneous lab solvents, paint solvents, discarded fuels, and miscellaneous one-time disposal items.

3, 4. Paint spray booth wastes have EPA hazard codes D001 and D008.

7. Includes miscellaneous small quantities of laboratory chemicals. The amount and type vary from year to year.

8, 9. Radioactive and hazardous mixed waste metals sludge. EP toxicity test indicates greater than allowable concentrations of cadmium and lead in the leachate.

12, 13. Metals precipitation sludge buried prior to August 25, 1985. Evidence obtained at that time indicates that the sludge buried may have been toxic.Will be presumed to be toxic unless investigation proves otherwise.

JUSTIFICATION FOR CHANGES
REVISED PART A PERMIT APPLICATION
PORTSMOUTH URANIUM ENRICHMENT COMPLEX

1. Form 3, Page 1 of 5

   A. **Line 1** The volume of X-752 Hazardous Waste Storage Facility has been changed from 6,055 gallons to 100,000 gallons to reflect the total storage area for both liquids (6,055 gallons) within the diked areas, and solids within the remainder of the facility.

   B. **Line 2** The volume of the chromium sludge lagoon has been recalculated and is now listed as 2.1×10^6 gallons instead of 2.3×10^6 gallons.

   C. **Line 4** The X-231B Oil Biodegradation Plot is now properly listed as "D81 Land Application" instead of "S03 Waste Pile."

   D. **Line 5** The X-749 Contaminated Materials Disposal Facility is once again listed on the Part A Permit Application. Metal sludges from the X-705 metals precipitation process were tested by the EP Toxicity Test in October 1983 prior to disposal and were determined to be nonhazardous. Subsequent testing in August 1985 found that some of the batches of sludge were EP toxic hazardous wastes. Because of this, it is suspected that some EP toxic hazardous sludges were buried in the X-749 facility and the unit should be listed as a RCRA facility pending the outcome of further investigations.

2. Form 3, Page 3 of 5

   A. **Lines 3 & 4** Line 4 has been inserted to reflect the two hazard codes for the wastes listed on Line 3.

   B. **Lines 5, 6, & 7** These lines are the same as lines 4, 5, & 6, respectively, on the January 13 Part A.

   C. **Lines 8 & 9** These lines reflect the metal precipitation sludge.

   D. **Line 10** This is the same as Line 7 in the January 13 Part A.

   E. **Line 11** This is the type of hazardous waste placed in X-701B for treatment.

   F. **Line 12** Volume of metals precipitation sludge buried before August 25, 1985.

   G. The waste listed on Line 8 of the January 13 Part A has been deleted as there is no further disposal of this material at X-231B (D81).

   H. The waste listed on Line 9 of the January 13 Part A has been deleted. While this material (trichloroethylene) is present in the groundwater around X-701B (T02), there is no indication that any in the form of a hazardous waste was, or is, disposed of at X-701B. X-701B is a RCRA facility due to the neutralization of D002 corrosives within the lagoon.

FORM 1 GENERAL — EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

II. EPA I.D. NUMBER: F 0 H 7 8 9 0 0 0 8 9 8 3 D

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER: 0H7890008983

III. FACILITY NAME: U.S. DOE-Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Environmental Protection Branch-PORTS
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION: U.S. Route 23, South
Piketon, onio

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: U S D O E P O R T S M O U T H G A S E O U S D I F F U S I O N P L A N T

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 T R A V A G L I N I, M I K E E N V E N G I N E E R	6 1 5 5 7 6 0 8 4 5

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 P.O. B O X E E N V I R O N M E N T A L P R O T B R

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 O A K R I D G E	T N	3 7 8 3 1

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 U.S. R O U T E 2 3, S O U T H

B. COUNTY NAME

P I K E

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 P I K E T O N	O H	4 5 6 6 1	

CONTINUE ON REVERSE

1-13-86

C THIRD: Industrial Inorgan Chemical

D FOURTH:

VIII. OPERATOR INFORMATION

A. NAME: U.S. DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)
F

D. PHONE (area code & no.): A 615 576 0045

E. STREET OR P.O. BOX: P.O. BOX E ENVIRONMENTAL PROT BR

F. CITY OR TOWN: OAK RIDGE

G. STATE: TN

H. ZIP CODE: 37831

IX. INDIAN LAND
Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): N OH0006092

D. PSD (Air Emissions from Proposed Sources):

B. UIC (Underground Injection of Fluids): U

E. OTHER (specify): 84-019 (specify) Ohio EPA - Solid Waste Disposal License

C. RCRA (Hazardous Wastes): R OH7890008983

E. OTHER (specify): (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Uranium Enrichment Plant has been operating since 1954; the Gas Centrifuge Enrichment Plant physical construction began in April, 1977, and was halted in June, 1985. The Portsmouth plant enriches uranium for national defense and commercial nuclear power reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235 (U-235). Ancillary processes, systems, and operations serving the uranium enrichment process include a cooling water system, a sanitary water system, a sewage system, a steam plant, laboratories, maintenance shops, a nitrogen manufacturing plant and others.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
William F. Manning, Director Enriching Operations Division	W. F. Manning	1/15/88

COMMENTS FOR OFFICIAL USE ONLY

C

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F | OH7890008983

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

[ ] 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

[ ] 2. NEW FACILITY (Complete item below.)

YR.	MO.	DAY
55	0	1

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.
1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C | DUP | | 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G	
X-2	T03	20	E	
1	S01	6055	G	
2	S04	2.3×10^6	G	
3	S03	0.71	B	
4	T02	35,000	U	
5				
6				
7				
8				
9				
10				

1) X-752 Hazardous Waste Storage Facility; estimated 110 208-liter (55-gallon) drums maximum
2) X-616 Chromium Sludge Lagoon
3) X-231B Oil Biodegradation Plots
4) X-701B Holding Pond

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES.
For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
Note. Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4 the line number and the additional code(s).

2. PROCESS DESCRIPTION If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A on the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K054	900	P	T03 D80	
X-2	D002	400	P	T03 D80	
X-3	D001	100	P	T03 D80	
X-4	D002				included with above

Continued from page 2.
NOTE: Photocopy this page before completing if more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): W | 0 | H | 7 | 8 | 9 | 0 | 0 | 0 | 8 | 9 | 8 | 3 | | 1

FOR OFFICIAL USE: W | DUP | | 2 | DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

No.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	23,200*	P	S01	
2	F001	2400	P	S01	
3	D008	4000*	P	S01	
4	U196	400	P	S01	
5	F007	400	P	S01	
6	U140	2000*	P	S01	
7	D007	1000	T	S04	
8	F001	0*	P	D81	
9	U228	0.30*	P	T02	
10					
11					
12					
13					
14					
15					
16					
17					
18		*See Form 3,			
19		Attachment I.			
20					
21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (8-80)

CONTINUE ON REVERSE

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F 0 H 7 8 9 0 0 0 8 9 8 3 | Y/N C: 16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 3 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures, existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 03 7	108 10 12 3

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

[ ] B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
William F. Manning, Director Enriching Operations Division	W. Manning	1/13/88

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
William F. Manning, Director Enriching Operations Division	W. Manning	1/13/88

1. Justification for changes in the revised Part A permit application.

   On Form 3, Page 1 of 5, the following changes were made (line numbers refer to the original Part A permit application):

   A. line 2 - The volume of the X-616 Chromium Sludge Lagoon was mistakenly listed as 2.8×10^{5} gallons; it should have been 2.3×10^{5} gallons (line 2 of the revised Part A).

   B. line 3 - The X-616 Chromate Reduction Facility was removed from the Part A permit application because the facility is a wastewater treatment facility and, as such, is governed by GAT's NPDES permit.

   C. The X-701B Holding Pond is being added to the revised Part A permit application. The reasoning for this addition is the X-701B is an active facility with trichloroethylene (a listed hazardous substance) entering the pond from an unknown source and being detected in the effluent. Additionally, records indicate that a reroute line from the X-701C Neutralization Pit was not completed until February, 1982, resulting in small quantities of chromic acid (a listed hazardous substance) being discharged to the X-701B Holding Pond.

   D. A reference is made to the X-7725A Waste Accountability Facility on Form 3, Attachment II, of the original Part A permit application. This was originally part of the Gas Centrifuge Enrichment Plant (GCEP). With the termination of the GCEP project, the X-7725A will not be used in any manner as a Treatment, Storage and Disposal facility.

2. The inclusion of the X-749 Contaminated Materials Disposal Facility was the result of a misunderstanding of statements made during a meeting held at Goodyear Atomic Corporation in July, 1985, among representatives of GAT, DOE, OEPA, and USEPA. There is no intention on the part of GAT to use the X-749 facility as a hazardous waste landfill, nor has the facility been used as a hazardous waste landfill since November, 1980. The facility will be addressed in the Part B Permit Application as a Solid Waste Management Unit with a continuing release (chlorinated solvents).

3. See item 1.C. above.

4. In converting the numbers to metric units, some calculational errors were made in the revised Part A permit application. Process design capacities, Form 3, Page 1 of 5, have been restated in English units.

5. On Page 3 of 5, Form 3 of the Part A application (Attachment II), all units of measure have been restated in the correct units and have been revised where records indicate revision is necessary. Line 6 on page 3 of 5 refers to small quantities of miscellaneous laboratory chemicals with only one EPA Hazardous Waste number being listed. The annual generation rate includes the weight of inert adsorbent added to the drums.

6. It is requested that the X-231B Oil Biodegradation Plots be classified as a waste pile for the storage of trichloroethylene rather than a land treatment unit. The reason for this request is that there would be an ineffectively low rate of chlorinated solvent degradation and, assuming no evaporation, the solvents would remain in the soil for many years.

1) Includes miscellaneous lab solvents, paint solvents, discarded fuels, miscellaneous one-time disposal items.

3) Paint spray booth solids also have EPA Hazard Code D001.

6) Includes small quantities of miscellaneous laboratory chemicals. The amounts and types will vary from year to year. Weight includes inert adsorbent added to containers.

8) Land application of hazardous solvents to X-231B Oil Biodegradation Plots discontinued in December, 1983. The maximum estimated volume of hazardous solvents applied prior to that date is 1500-3000 liters per year.

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F OH7890008983 D

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER: OH7890008983

III. FACILITY NAME: U.S. DOE-Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS:
U.S. Department of Energy
Environmental Protection Branch-PORTS
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION:
U.S. Route 23, South
Piketon, ohio

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: U.S. DOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 TRAVAGLINI MIKE ENV ENGINEER	615 576 0845

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 P.O. BOX E ENVIRONMENTAL PROT BR

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	TN	37831

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 5 U.S. ROUTE 23, SOUTH

B. COUNTY NAME: PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	OH	45661	

CONTINUE ON REVERSE

10-10-85

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 Industrial Inorganic Chemicals	

C. THIRD	D. FOURTH

VIII. OPERATOR INFORMATION

A. NAME: U.S. DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? XX YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)
F

D. PHONE (area code & no.): A 615 576 0845

E. STREET OR P.O. BOX: P.O. BOX E ENVIRONMENTAL PROT BR

F. CITY OR TOWN: OAK RIDGE

G. STATE: TN

H. ZIP CODE: 37831

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES XX ☐ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N OH0006092	9 P

B. UIC (Underground Injection of Fluids)	E. OTHER (specify)
9 U	9 84-019 (specify) Ohio EPA - Solid Waste Disposal License

C. RCRA (Hazardous Wastes)	E. OTHER (specify)
9 R	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954; the Gas Centrifuge Enrichment Plant physical construction began in April, 1977 and was terminated in June, 1985. The Gaseous Diffusion Plant enriches uranium for national defense and commercial nuclear reactors. The commercial reactors are fueled with uranium containing from two to four percent of uranium 235 (U-235) isotope. Since naturally occurring uranium contains only 0.711% U-235, the uranium must be processed to enrich it in the U-235 isotope. Ancillary processes, systems, and operations serving the uranium enrichment process include a cooling water system, a sanitary water system, a sewage system, a steam plant, laboratories, maintenance shops, a nitrogen manufacturing plant and others.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division	John W Morgan	11-11-85

COMMENTS FOR OFFICIAL USE ONLY

C

Attachment I

Form 1

Revised Part A Permit Application

Goodyear Atomic Corporation

Question X. Existing Environmental Permits

A. NPDES OH0110931 GCEP construction permit

D. The Portsmouth Uranium Enrichment Plant has numerous air emissions source permits issued by the Ohio EPA.

HAZARDOUS WASTE PERMIT APPLICATION

EPA

RCRA

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER: F OH 7 8 9 0 0 0 8 9 8 3

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☒ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED. *(use the boxes to the left)*

YR.	MO.	DAY
55	01	14

☐ 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES: PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☒ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES — CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRES-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR OR GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRES-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	C

EXAMPLE FOR COMPLETING ITEM III *(shown in lines numbered X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (From list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G	
X-2	T03	20	E	
1	S01	7150 22,920.7	L	
2	S04	8900 Cant Use	C	
3	T04	84,000	V	
4	D81	0.71	B	
5	D80	.60	A	
6	T02	191,000	V	
7				
8				
9				
10				

C DUP 1

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1) X-752 Hazardous Waste Storage Facility
2) X-616 Chromium Sludge Lagoon
3) X-616 Chromium Sludge Lagoons: one time treatment to detoxify sludge; est. maximum of sludge to be treated 3500 m^3.
4) X-231B Oil Biodegradation Plot
5) X-749 Contaminated Materials Disposal Facility
6) X-701B Holding Pond

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
Notes: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

W | | | | | | | | | | | | T/A | C | 1

FOR OFFICIAL USE ONLY

W | DUP | T/A | C | 2 | DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	9360	L	S01	Container Storage
2	F001	1040	L	S01	
3	D008	1040	L	S01	
4	U196	416 Pyridine	L	S01	
5	F007	416	L	S01	
6	U112	1040 Ethyl Acetate	L	S01	
7	D007	8900	C	S04	Surface Impoundment X-616
8	F001	0.71	B	D81 S03	Land Application / Waste Pile
9	U228	4 TCE	A	D80	Landfill X-749
10	U228	191,000 TCE	Y	T02	Surface Impoundment X-701B
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

1) Includes misc. laboratory vents, paint solvents, discar fuel (gasoline), miscellaneous process solvents (non-listed), and miscellaneous one-time disposal items.

6) Item includes small quantities miscellaneous laboratory chemicals with various EPA waste nos. Volume includes inert absorbent in drums.

8) Land application of chlorinated solvents discontinued 12/83. Present use is land application for oil and waste pile for chlorinated solvents.

9), 10) Trichloroethylene detected in monitoring wells. Facilities are continuing release points. Annual volume of waste does not reflect volume of trichloroethylene.

EPA I.D. NO. (enter from page 1)

F | 0 H 7 8 9 0 0 0 8 9 8 3 | T/N | C | 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures, existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
39 00 03 7	083 00 12 3

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box and skip to Section IX below.

[ ] B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

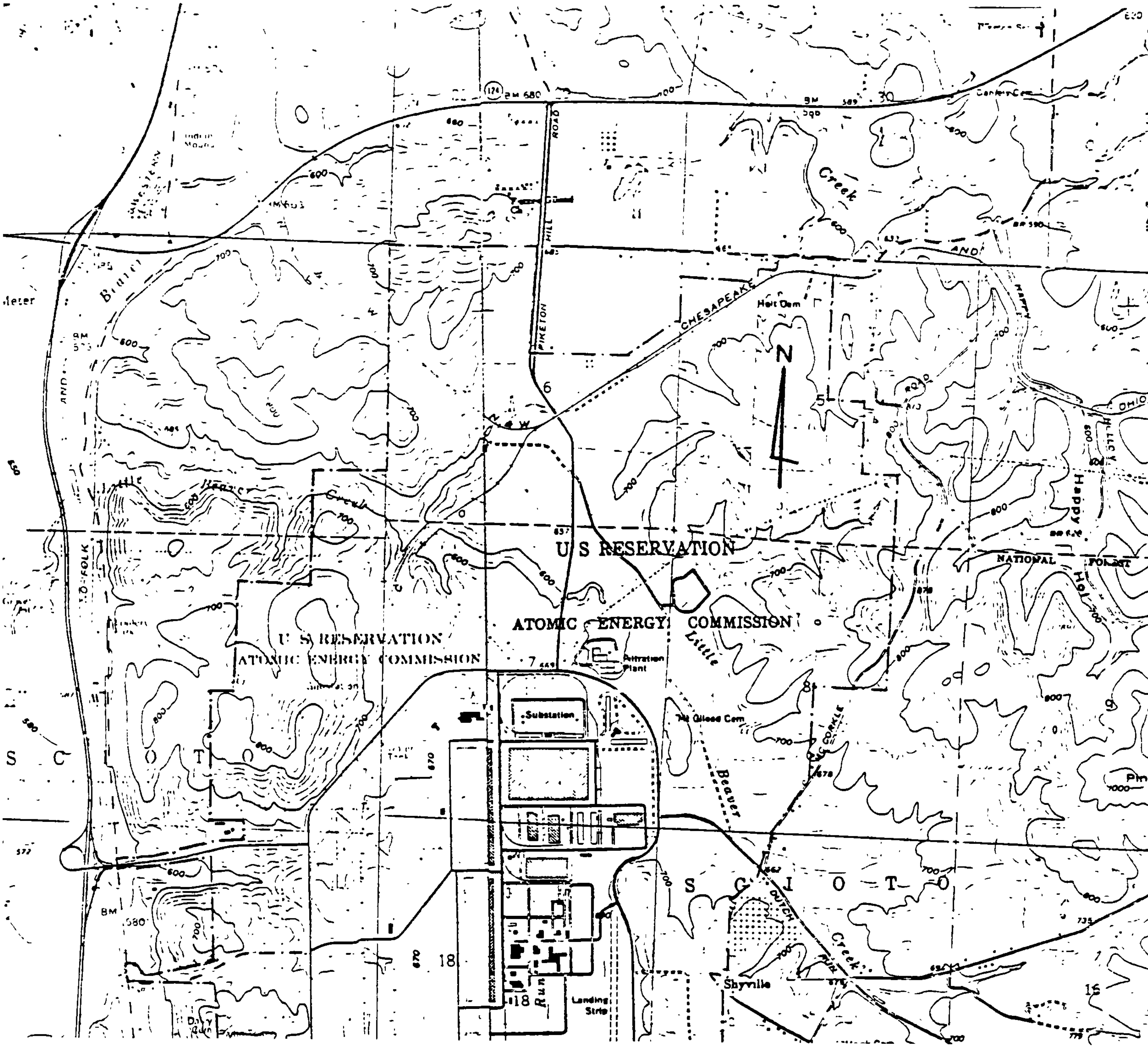
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division	John W. Morgan	10-10-85

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division	John W. Morgan	10-10-85



U S RESERVATION
ATOMIC ENERGY COMMISSION
U S RESERVATION
ATOMIC ENERGY COMMISSION
Substation
Filtration Plant
Landing Strip
Shyville
Holt Cem
CHESAPEAKE
NEW
PIKETON
HILL
ROAD
NORFOLK
Little Beaver Creek
Beaver
Creek
Little
Big Run
S C I O T O
S C I O T O
NATIONAL FOREST
Happy Hollow
OHIO

Form 1

Revised Part A Permit Application

Goodyear Atomic Corporation

Question XI. Map

The plantsite topographical map was obtained by combining four 7' 30" U. S. Geological Survey maps that intersect at N 39° 00' and W 83° 00'. The four maps utilized were:

The Wakefield, Ohio Quadrangle
N 3852.5 - W 8300/7.5
AMS 4361 I NE-Series V852

The Piketon, Ohio Quadrangle
N 3900 - W 8300/7.5
AMS 4362 II SE-Series V852

The Waverly South, Ohio Quadrangle
N 3900 - W 8252.5/7.5
AMS 4462 III SW-Series V852

The Lucasville, Ohio Quadrangle
N 3852.5 - W 8252.5/7.5
AMS 4461 IV NW-Series V852

Copies of the four maps are available on request.

There are approximately 60 residences within one quarter of a mile from the government reservation boundary. Eighteen residences obtain their drinking water from a well or cistern. Nine residences have county supplied water. The source of water is unknown for the remaining residences.

The plantsite facility drawing (page 5 of form 3) identifies the hazardous waste management facilities and surface streams.

(If ... in areas are spaced for elite type, i.e. 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

EPA

ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F 0 H 7 8 9 0 0 0 8 9 8 3

GENERAL INSTRUCTIONS

If a preprinted label has been provided, a ...t in the designated space. Review the info... ation carefully; if any of it is incorrect, c... through it and enter the correct data in ... appropriate fill—in area below. Also, if an... the preprinted data is absent *(the area to left of the label space lists the informa... that should appear)*, please provide it in ... proper fill—in area(s) below. If the labe... complete and correct, you need not comp... Items I, III, V, and VI *(except VI-B w... must be completed regardless)*. Complete ... items if no label has been provided. Refe... the instructions for detailed item des... tions and for the legal authorizations u... which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER: 0H7890008983

III. FACILITY NAME: U.S. DOE-Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS:
U.S. Department of Energy
Environmental Protection Branch-PORTS
Post Office Box E
Oak Ridge, Tennessee 37831

VI. FACILITY LOCATION:
U.S. Route 23, South
Piketon, ohio

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to an... questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third colum... if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activit... is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTA...
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP | U.S. DOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 TRAVAGLINI MIKE ENV ENGINEER	6 1 5 | 5 7 6 | 0 8 4 5

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 P.O. BOX E ENVIRONMENTAL PROT BR

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 OAK RIDGE	T N	3 7 8 3 1

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 U.S. ROUTE 23, SOUTH

B. COUNTY NAME

PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 PIKETON	O H	4 5 6 6 1	

10-10-85

CONTINUE ON REVE

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

U.S. DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also owner? YES NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 615 576 0843

E. STREET OR P.O. BOX

P.O. BOX E ENVIRONMENTAL PROT BR

F. CITY OR TOWN	G. STATE	H. ZIP CODE
OAK RIDGE	TN	37831

IX. INDIAN LAND

Is the facility located on Indian lands? YES XX NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N OH0006092	9 P
B. UIC (Underground Injection of Fluids)	**E. OTHER** (specify)
9 U	9 84-019 (specify) Ohio EPA - Solid Waste Disposal License
C. RCRA (Hazardous Wastes)	**E. OTHER** (specify)
9 R	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954; the Gas Centrifuge Enrichment Plant physical construction began in April, 1977 and was terminated in June, 1985. The Gaseous Diffusion Plant enriches uranium for national defense anc commercial nuclear reactors. The commercial reactors are fueled with uranium containing from two to four percent of uranium 235 (U-235) isotope. Since naturally occurring uranium contains only 0.711% U-235, the uranium must be processed to enrich it in the U-235 isotope. Ancillary processes, systems, and operations serving the uranium enrichment process include a cooling water system, a sanitary water system, a sewage system, a steam plant, laboratories, maintenance shops, a nitrogen manufacturing plant and others.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division		10-10-85

COMMENTS FOR OFFICIAL USE ONLY

EPA Form 3510-1 (6-80) REVERSE

Attachment I

Form 1

Revised Part A Permit Application

Goodyear Atomic Corporation

Question X. Existing Environmental Permits

A. NPDES OH0110931 GCEP construction permit

D. The Portsmouth Uranium Enrichment Plant has numerous air emissions source permits issued by the Ohio EPA.

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZ OUS WASTE PERMIT APPLICATIO

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.

I. EPA I.D. NUMBER

F	O	H	7	8	9	0	0	0	8	9	8	3

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility o revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☒ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete items below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED. *(use the boxes to the left)*

C	YR.	MO.	DAY
8	5 5	0 1	1 4

☐ 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITI PROVIDE THE DAT *(yr., mo., & day)* OPE TION BEGAN OR IS EXPECTED TO BEG

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☒ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES — CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided fo entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, the describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS.
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	G

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP C 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G	
X-2	T 0 3	20	E	
1	S 0 1	7150	L	
2	S 0 4	8900	C	
3	T 0 4	84,000	V	
4	D 8 1	0.71	B	
5	D 8 0	.60	A	
6	T 0 2	191,000	V	
7				
8				
9				
10				

Continued from the front.

III. PROCESSES (continued)

2. SPACE FOR ADDITIONAL PROCESS CODES — USE FOR DESCRIBING OTHER PROCESSES (code "Z"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1) X-752 Hazardous Waste Storage Facility
2) X-616 Chromium Sludge Lagoon
3) X-616 Chromium Sludge Lagoons: one time treatment to detoxify sludge; est. maximum of sludge to be treated 3500 m^3.
4) X-231B Oil Biodegradation Plot
5) X-749 Contaminated Materials Disposal Facility
6) X-701B Holding Pond

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): W

FOR OFFICIAL USE: W DUP 2 DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	9360	L	S01	
2	F001	1040	L	S01	
3	D008	1040	L	S01	
4	U196	416	L	S01	
5	F007	416	L	S01	
6	U112	1040	L	S01	
7	D007	8900	C	S04	
8	F001	0.71	B	D81 S03	
9	U228	4	A	D80	
10	U228	191,000	Y	T02	
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12					
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25					
26					

IV. DESCRIPTION OF HAZARDOUS W (continued)

E. USE THIS SPACE TO LIST ADDITIO — D. PROCESS CODES FROM ITEM D(1) — E.

1) Includes misc. laboratory solvents, paint solvents, discarded fuel (gasoline), miscellaneous process solvents (non-listed), and miscellaneous one-time disposal items.

6) Item includes small quantities miscellaneous laboratory chemicals with various EPA waste nos. Volume includes inert absorbent in drums.

8) Land application of chlorinated solvents discontinued 12/83. Present use is land application for oil and waste pile for chlorinated solvents.

9), 10) Trichloroethylene detected in monitoring wells. Facilities are continuing release points. Annual volume of waste does not reflect volume of trichloroethylene.

EPA I.D. NO. (enter from page 1)

1	F	0	H	7	8	9	0	0	0	8	9	8	3	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more details)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground-level)* that clearly delineate all existing structures, existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more details)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes & seconds)	LONGITUDE (degrees, minutes & seconds)
39 00 03 7	108 30 02 3

VIII. FACILITY OWNER

A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO.
E:	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F: G			

IX. OWNER CERTIFICATION

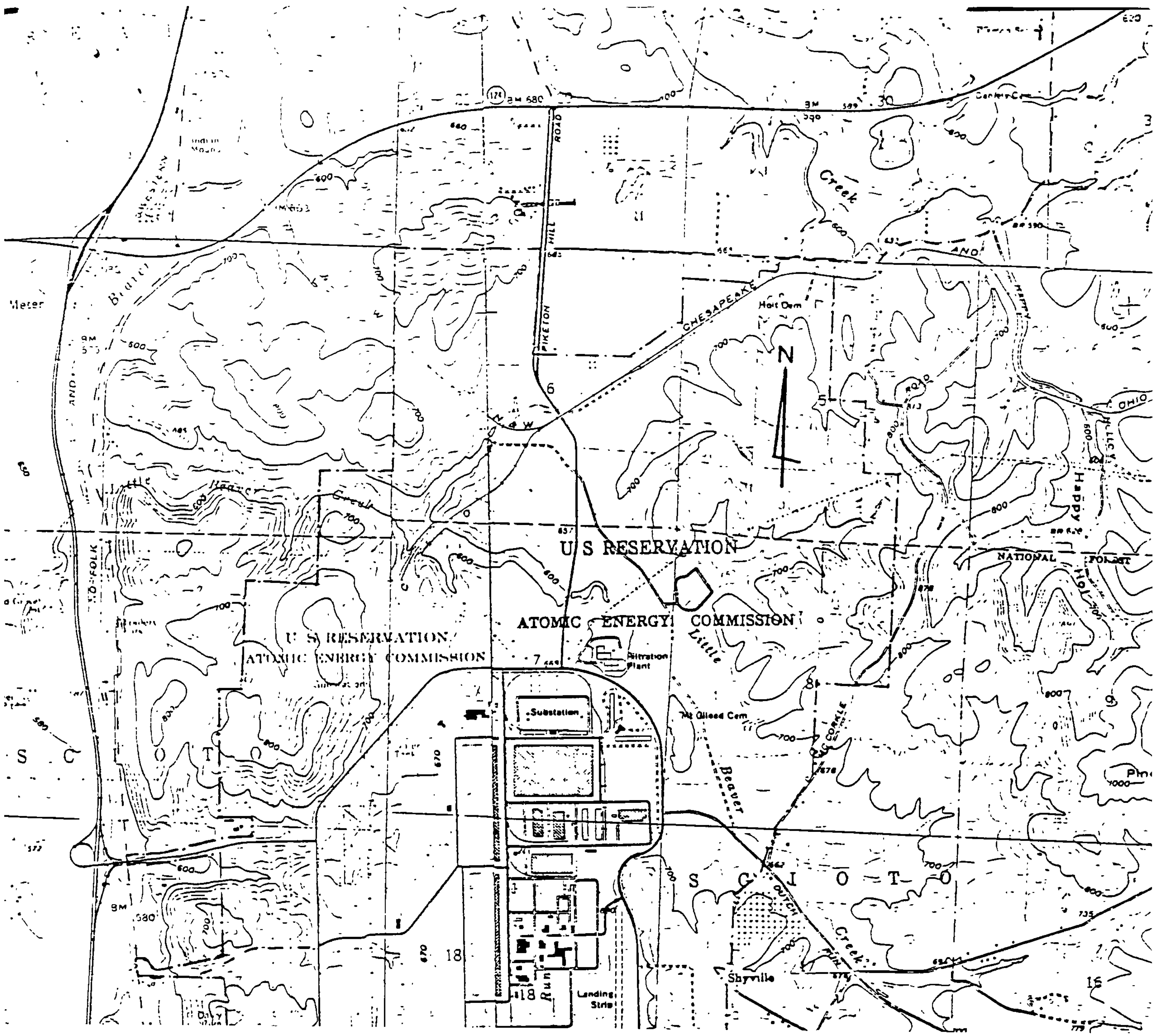
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division		10-12-85

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
H. Doran Fletcher, Director Enriching Operations Division		10-12-85


U S RESERVATION
ATOMIC ENERGY COMMISSION
U S RESERVATION
ATOMIC ENERGY COMMISSION
Substation
Filtration Plant
Holt Cem
Mt Gilead Cem
Landing Strip
Shyville
CHESAPEAKE
PIKETON
HILL
ROAD
NORFOLK
AND
Little Beaver Creek
Little Beaver
Creek
Dutch Run Creek
Run
Happy Hollow
NATIONAL FOREST
OHIO
S C I O T O
S C I O T O
N

Form 1

Revised Part A Permit Application

Goodyear Atomic Corporation

Question XI. Map

The plantsite topographical map was obtained by combining four 7' 30" U. S. Geological Survey maps that intersect at N 39° 00' and W 83° 00'. The four maps utilized were:

The Wakefield, Ohio Quadrangle
N 3852.5 - W 8300/7.5
AMS 4361 I NE-Series V852

The Piketon, Ohio Quadrangle
N 3900 - W 8300/7.5
AMS 4362 II SE-Series V852

The Waverly South, Ohio Quadrangle
N 3900 - W 8252.5/7.5
AMS 4462 III SW-Series V852

The Lucasville, Ohio Quadrangle
N 3852.5 - W 8252.5/7.5
AMS 4461 IV NW-Series V852

Copies of the four maps are available on request.

There are approximately 60 residences within one quarter of a mile from the government reservation boundary. Eighteen residences obtain their drinking water from a well or cistern. Nine residences have county supplied water. The source of water is unknown for the remaining residences.

The plantsite facility drawing (page 5 of form 3) identifies the hazardous waste management facilities and surface streams.

Il—in areas are spaced for elite type, i.e., 12 characters/inch). HAZARDOUS WASTE COMPLIANCE *Form Approved*

FORM 1 GENERAL — EPA — U.S. ENVIRO... PLAN INFORMATION ...AL INFORMATION ...lidated Permits Program (Read the "General Instructions" before starting.)

EPA I.D. NUME H 7 8 9 0 0 0 8 9 8 3 — F/A — C — D

LABEL ITEMS

I. EPA I.D. NUMBER

II. FACILITY NAME

III. FACILITY MAILING ADDRESS

IV. FACILITY LOCATION

OH7890008983

Portsmouth Uranium Enrichment Plant

U.S. Department of Energy
Environmental Protection Branch-PORTS
Post Office Box E
Oak Ridge, Tennessee 37831

U.S. Route 23, South
Piketon, Ohio

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

V. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

VI. NAME OF FACILITY

SKIP: U S D O E P O R T S M O U T H U R A N I U M E N R I C H M E N T P L A N T

VII. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*: S L E E M A N R O B E R T C E N V. E N G I N E E R

B. PHONE *(area code & no.)*: 6 1 5 — 5 7 6 — 0 8 5 0

VIII. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: P O B O X E R M G 1 1 4 E N V I R N M T B R

B. CITY OR TOWN: O A K R I D G E

C. STATE: T N

D. ZIP CODE: 3 7 8 3 0

IX. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: U S R T 2 3 S O U T H

B. COUNTY NAME: P I K E

C. CITY OR TOWN: P I K E T O N

D. STATE: O H

E. ZIP CODE: 4 5 6 6 1

F. COUNTY CODE *(if known)*:

RECEIVED
JUN 12 1989
WMD RAIU
EPA, REGION V

7-3-89

CONTINUE ON REVERSE

Form 1

Attachment II

Question XI. Map

The plantsite topographical map was obtained by combining four 7' 30" U.S. Geological Survey maps that intersect at N 39° 00' and W 83° 00'. The four maps utilized were:

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N 3852.5 - W 8300/7.5
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There are approximately 60 residences within one quarter of a mile from the government reservation boundary. Eighteen residences obtain their drinking water from a well or cistern. Nine residences have county supplied water. The source of water is unknown for the remaining residences.

The plantsite facility drawing (page 5 of form 3) identifies the hazardous waste management facilities and surface streams.

(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

EPA I.D. NUMBER: 0 H 7 8 9 0 0 0 8 9 8 3 — T/A: C: 1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[XX] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*: C | YR. 55 | MO. 01 | DAY 14

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN: YR. | MO. | DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C | DUP | T/A | C: 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G		5				
X-2	T03	20	E		6				
1	D81	0.71	B		7				
2					8				
3					9				
4					10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES *(code "T0" OR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.*

The purpose of the waste oil biodegradation plots is for the disposal of waste oils with radioactive contamination.

Recent sampling has revealed that it is possible in past practice that some radioactive- and solvent-contaminated oils were disposed at the site. Disposal of waste oil contaminated with solvent has been halted; alternative methods are currently under study.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** — Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** — For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate **all** the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO *(enter code)*	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE *(enter code)*	D. PROCESSES 1. PROCESS CODES *(enter)*	D. PROCESSES 2. PROCESS DESCRIPTION *(if a code is not entered in D(1))*
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				*included with above*

Continued from page 2.

NOTE: Photocopy this page before completing if you ore than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

S												T/A	C
W	0	H	7	8	9	0	0	0	8	9	8	3	1

FOR OFFICIAL USE O

S		T/A	C	
W	DUP		2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1					Currently, there are no radio-
2					active mixed wastes disposed of
3					in the waste oil biodegradation
4					plots (See Item III.C.)
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

V. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

0	H	7	8	9	0	0	0	8	9	8	3	T/A	C
													6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*			LONGITUDE *(degrees, minutes, & seconds)*		
39	00	37	083	00	023

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
	C G		

IX. OWNER CERTIFICATION

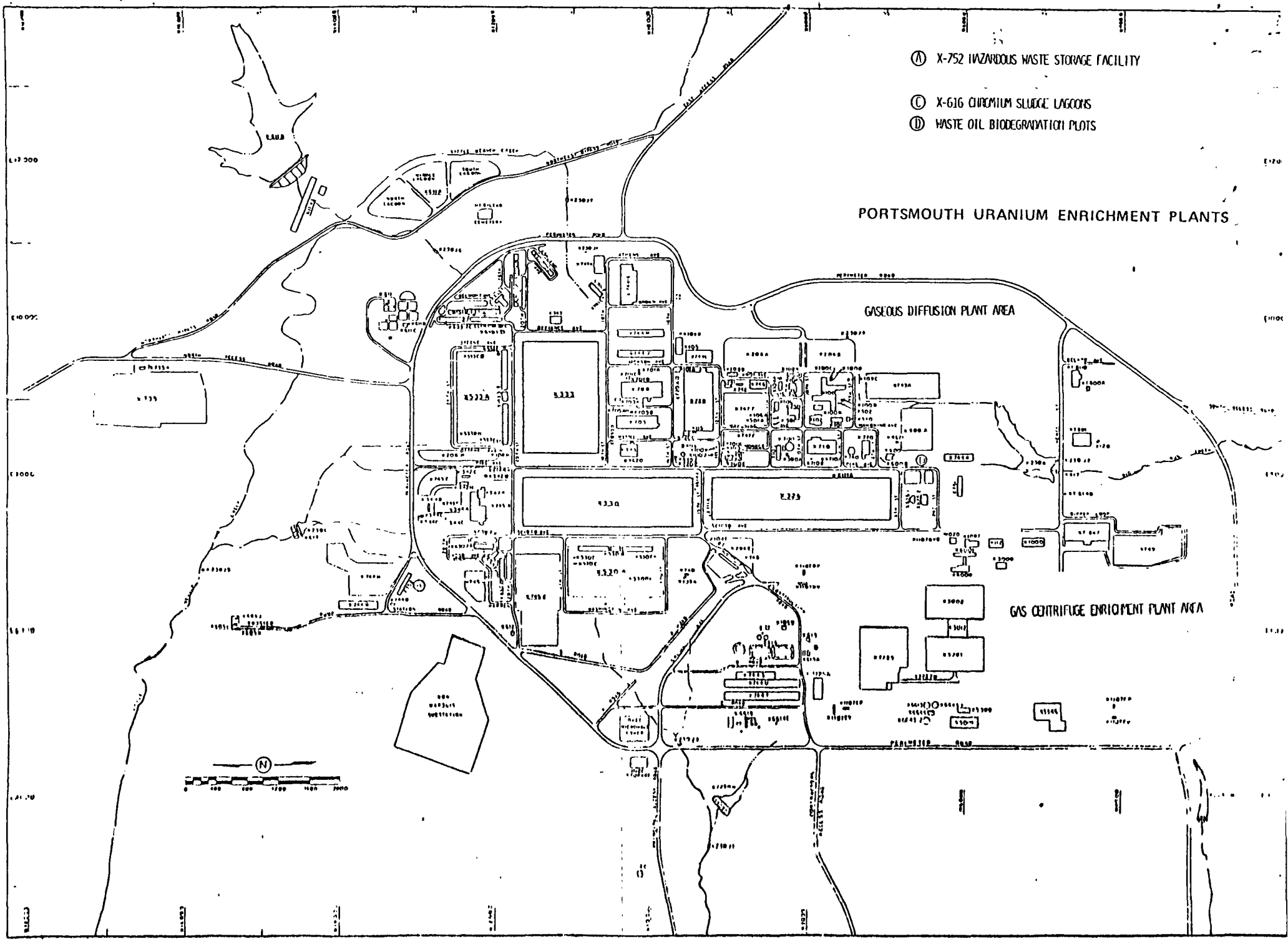
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
H. D. Fletcher, Director Enriching Operations Divison	H. D. Fletcher	7/3/84

X. OPERATOR CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
H. D. Fletcher, Director Enriching Operations Division	H. D. Fletcher	7/3/84


Ⓐ X-752 HAZARDOUS WASTE STORAGE FACILITY
Ⓒ X-616 CHROMIUM SLUDGE LAGOONS
Ⓓ WASTE OIL BIODEGRADATION PLOTS
PORTSMOUTH URANIUM ENRICHMENT PLANTS
GASEOUS DIFFUSION PLANT AREA
GAS CENTRIFUGE ENRICHMENT PLANT AREA

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F OH7890008983 ID

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: *Complete* A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: US DOE PORTSMOUTH URANIUM ENRICHMT PLANT

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
2 SLEEMAN ROBERT C ENVIR ENGR	615 576 0850

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX		
3 PO BOX E RM G114 ENVIRNMT BR		
B. CITY OR TOWN	**C. STATE**	**D. ZIP CODE**
4 OAK RIDGE	TN	37830

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5 US RT 23 SOUTH			
B. COUNTY NAME			
PIKE			
C. CITY OR TOWN	**D. STATE**	**E. ZIP CODE**	**F. COUNTY CODE** *(if known)*
6 PIKETON	OH	45661	

RECEIVED 4/9/84

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
7 2819 (specify) Industrial Inorganic Chemicals	7 (specify)
C. THIRD	**D. FOURTH**
7 (specify)	7 (specify)

VIII. OPERATOR INFORMATION

A. NAME: US DOE PORTSMOUTH URANIUM ENRICHMT. PLANT

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; M = PUBLIC (other than federal or state); S = STATE; O = OTHER (specify); P = PRIVATE

F (specify)

D. PHONE (area code & no.) A 615 576 0845

E. STREET OR P.O. BOX: P O BOX E RM G114 ENVIRNMT BR

F. CITY OR TOWN: OAK RIDGE

G. STATE: TN

H. ZIP CODE: 37830

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): 9 N OH0006092	**D. PSD** (Air Emissions from Proposed Sources): 9 P
B. UIC (Underground Injection of Fluids): 9 U	**E. OTHER** (specify): 9 84-019 (specify) Ohio EPA - Solid Waste Disposal License
C. RCRA (Hazardous Wastes): 9 R OH7890008983	**E. OTHER** (specify): 9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. See Form 1 Attachment H

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954; the Gas Centrifuge Enrichment Plant physical construction began in April, 1977. Each plant enriches uranium for national defense and commercial nuclear reactors. The commercial reactors are fueled with uranium containing from two to four percent of uranium 235 (U-235) isotope. Since naturally occurring uranium contains only 0.711% U-235, the uranium must be processed to enrich it in the U-235 isotope. Ancillary processes, systems, and operations serving the uranium enrichment process include a cooling water system, a sanitary water system, a sewage system, a steam plant, laboratories, maintenance shops, a nitrogen manufacturing plant and others.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED

COMMENTS FOR OFFICIAL USE ONLY

C

Form 1

Attachment I

Question X. Existing Environmental Permits (Additional)

A.	NPDES	OH0110931
D.	Air Emission Source Permits	The Portsmouth Uranium Enrichment Plants have numerous air emissions source permits issued by the Ohio EPA.

Form 1

Attachment II

Question XI. Map

The plantsite topographical map was obtained by combining four 7' 30" U.S. Geological Survey maps that intersect at N 39° 00' and W 83° 00'. The four maps utilized were:

The Wakefield, Ohio Quadrangle
N 3852.5 - W 8300/7.5
AMS 4361 I NE-Series V852

The Piketon, Ohio Quadrangle
N 3900 - W 8300/7.5
AMS 4362 II SE-Series V852

The Waverly South, Ohio Quadrangle
N 3900 - W 8252.5/7.5
AMS 4462 III SW-Series V852

The Lucasville, Ohio Quadrangle
N 3852.5 - W 8252.5/7.5
AMS 4461 IV NW-Series V852

Copies of the four maps are available on request.

There are approximately 60 residences within one quarter of a mile from the government reservation boundary. Eighteen residences obtain their drinking water from a well or cistern. Nine residences have county supplied water. The source of water is unknown for the remaining residences.

The plantsite facility drawing (page 5 of form 3) identifies the hazardous waste management facilities and surface streams.

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e. 12 characters/inch)

Form Approved. OMB No. 158-R0175

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F | OH7890008963

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

I. EPA I.D. NUMBER: OH7890008963

III. FACILITY NAME: US DOE - Portsmouth Gaseous Diffusion Plant

V. FACILITY MAILING ADDRESS: U.S. Department of Energy
Post Office Box 700
Piketon, Ohio 45661

VI. FACILITY LOCATION: 3930 US Route 23 South
Piketon, Ohio 45661

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK X: YES	NO	FORM ATTACHED
A. Is the facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: DOE PORTSMOUTH GASEOUS DIFFUSION PLANT

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 RICHARD R SHAFFER	614 897 5020

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 POST OFFICE BOX 700

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 PIKETON	OH	45661

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 3930 US ROUTE 23 SOUTH

B. COUNTY NAME: PIKE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
	OH	45661	

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2819 (specify) Industrial Inorganic Chemicals	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

US DEPARTMENT OF ENERGY

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

F (specify)

D. PHONE (area code & no.)

A 614 897 5010

E. STREET OR P.O. BOX:

POST OFFICE BOX 700

F. CITY OR TOWN

PIKETON

G. STATE

OH

H. ZIP CODE

45661

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
N OH0000000*ED	P
B. UIC (Underground Injection of Fluids)	**E. OTHER** (specify)
U	0666000000 Facility Air Permit Designation
C. RCRA (Hazardous Wastes)	**E. OTHER** (specify)
OH7890008963	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Portsmouth Gaseous Diffusion Plant has been operating since 1954. The plant enriches uranium for national defense and for commercial nuclear reactors. Commercial reactors are fueled with uranium containing from two to four percent uranium-235. Ancillary processes, systems, and operations serving the enrichment process include a cooling water system, a nitrogen manufacturing plant, a sanitary water system, a sewage treatment plant, laboratories, maintenance shops, and other facilities.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Eugene W. Gillespie, Site Manager		

COMMENTS FOR OFFICIAL USE ONLY

EPA Form 3510-1 (6-80) REVERSE

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F O H 7 8 9 0 0 0 8 9 8 3

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☐ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY
8 5	0 1	1 4

☐ 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G	
X-2	T 0 3	20	E	
1	S 0 1	100,000	G	
2	T 0 2	35,000	U	
3	D 8 1	0.71	B	
4	D 8 0	44.5	A	
5	S 0 1	1.0×10^6	G	
6	S 0 1	17,000	G	
7	S 0 1	750,000	G	
8	S 0 1	1.25×10^6	G	
9	S 0 1	1.1×10^6	G	

Continued from the front:

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04") FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

1. X-752 Hazardous Waste Storage Facility
2. X-701B Holding Pond
3. X-231B Oil Biodegradation Plot
4. X-749 Contaminated Materials Disposal Facility
5. X-744G Non-UESA Bulk Storage Building
6. X-326 Mixed Waste Storage Facility
7. X-744H Warehouse
8. X-3346 Feed and Withdrawal Building
9. XT-847 GCEP Warehouse

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the wastes.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

...ued from page 2.
NOTE Photocopy this page before completing if you have more than 26 wastes to list.

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EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
W	OH7890008983	W	DUP
T/A	1	T/A	2
C		C	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	23,200	P	S01	
2	D002	5,000	P	S01	
3	D002	80,000	P	S01	
4	D007				
5	D001	4,000	P	S01	
6	D008				
7	D003	1,000	P	S01	
8	D004	10	P	S01	
9	D005	10	P	S01	
10	D005	10	P	S01	
11	D006				
12	D006	10	P	S01	
13	D006	90,000	P	S01	
14	D008				
15	D006	500	P	S01	
16	D009				
17	D007	0	T	S04	
18	D008	5,000	P	S01	
19	D009	10	P	S01	
20	D010	10	P	S01	
21	D011	10	P	S01	
22	D015	10	P	S01	
23	D016	10	P	S01	
24	F001	2,400	P	S01	
25	F002	12,000	P	S01	
26	F003	2,500	P	S01	

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from page 2.
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EPA I.D. NUMBER (enter from page 1)	T/A	C	FOR OFFICIAL USE ONLY			
W OH7890008983		1	W	DUP	T/A C 2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	F005	1,000	P	S01	
2	F007	400	P	S01	
3	P012	10	P	S01	
4	P029	10	P	S01	
5	P063	10	P	S01	
6	P098	10	P	S01	
7	P104	10	P	S01	
8	P105	10	P	S01	
9	P106	10	P	S01	
10	P108	10	P	S01	
11	P119	10	P	S01	
12	P123	10	P	S01	
13	U002	10	P	S01	
14	U012	10	P	S01	
15	U019	10	P	S01	
16	U026	10	P	S01	
17	U031	10	P	S01	
18	U036	10	P	S01	
19	U037	10	P	S01	
20	U044	10	P	S01	
21	U052	10	P	S01	
22	U056	10	P	S01	
23	U069	10	P	S01	
24	U076	10	P	S01	
25	U077	10	P	S01	
26	U078	10	P	S01	

EPA Form 3510-3 (6-80) CONTINUE ON REVERSE

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NOTE Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
	T/A C		T/A C
0 H 7 8 9 0 0 0 8 9 8 3	1	W DUP	2 DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	U079	10	P	S01	
2	U080	10	P	S01	
3	U108	10	P	S01	
4	U112	10	P	S01	
5	U117	10	P	S01	
6	U122	10	P	S01	
7	U123	10	P	S01	
8	U128	10	P	S01	
9	U131	10	P	S01	
10	U134	10	P	S01	
11	U140	10	P	S01	
12	U144	10	P	S01	
13	U151	10	P	S01	
14	U154	10	P	S01	
15	U159	10	P	S01	
16	U161	10	P	S01	
17	U169	10	P	S01	
18	U188	10	P	S01	
19	U196	10	P	S01	
20	U197	10	P	S01	
21	U201	10	P	S01	
22	U208	10	P	S01	
23	U209	10	P	S01	
24	U210	10	P	S01	
25	U211	10	P	S01	
26	U217	10	P	S01	

CONTINUE ON REVERSE

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

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EPA I.D. NUMBER (enter from page 1)	T/A C	FOR OFFICIAL USE ONLY		T/A C	
W OH789000898 3	1	W	DUP	2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)				D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	U218	10	P	S01				
2	U220	10	P	S01				
3	U223	10	P	S01				
4	U226	10	P	S01				
5	U228	10	P	S01				
6	U239	10	P	S01				
7	U240	10	P	S01				
8	U328	10	P	S01				
9	U353	10	P	S01				
10	U359	10	P	S01				
11	D006	0	P	080				
12	D008							
13	D002	0	P	T02				
14	F002	0	P	S04	S01			
15	U240	500	P	S01				
16	D018	10,000	P	S01				
17	D019	100	P	S01				
18	D020	100	P	S01				
19	D021	100	P	S01				
20	D022	100	P	S01				
21	D023	100	P	S01				
22	D024	100	P	S01				
23	D025	100	P	S01				
24	D027	100	P	S01				
25	D028	10,000	P	S01				
26	D029	10,000	P	S01				

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CONTINUE ON REVERSE

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NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)		FOR OFFICIAL USE ONLY	
C	O H 7 8 9 0 0 0 8 9 8 3	W	DUP
D	1	2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D 0 3 0	100	P	S 0 1	
2	D 0 3 1	100	P	S 0 1	
3	D 0 3 2	100	P	S 0 1	
4	D 0 3 3	100	P	S 0 1	
5	D 0 3 4	100	P	S 0 1	
6	D 0 3 5	10,000	P	S 0 1	
7	D 0 3 6	100	P	S 0 1	
8	D 0 3 7	10,000	P	S 0 1	
9	D 0 3 8	1,000	P	S 0 1	
10	D 0 3 9	25,000	P	S 0 1	
11	D 0 4 0	100	P	S 0 1	
12	D 0 4 1	100	P	S 0 1	
13	D 0 4 2	100	P	S 0 1	
14	D 0 4 3	100	P	S 0 1	
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*														
	F	0	H	7	8	9	0	0	0	8	9	8	3	6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

If existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
39 00 37	088 00 28

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

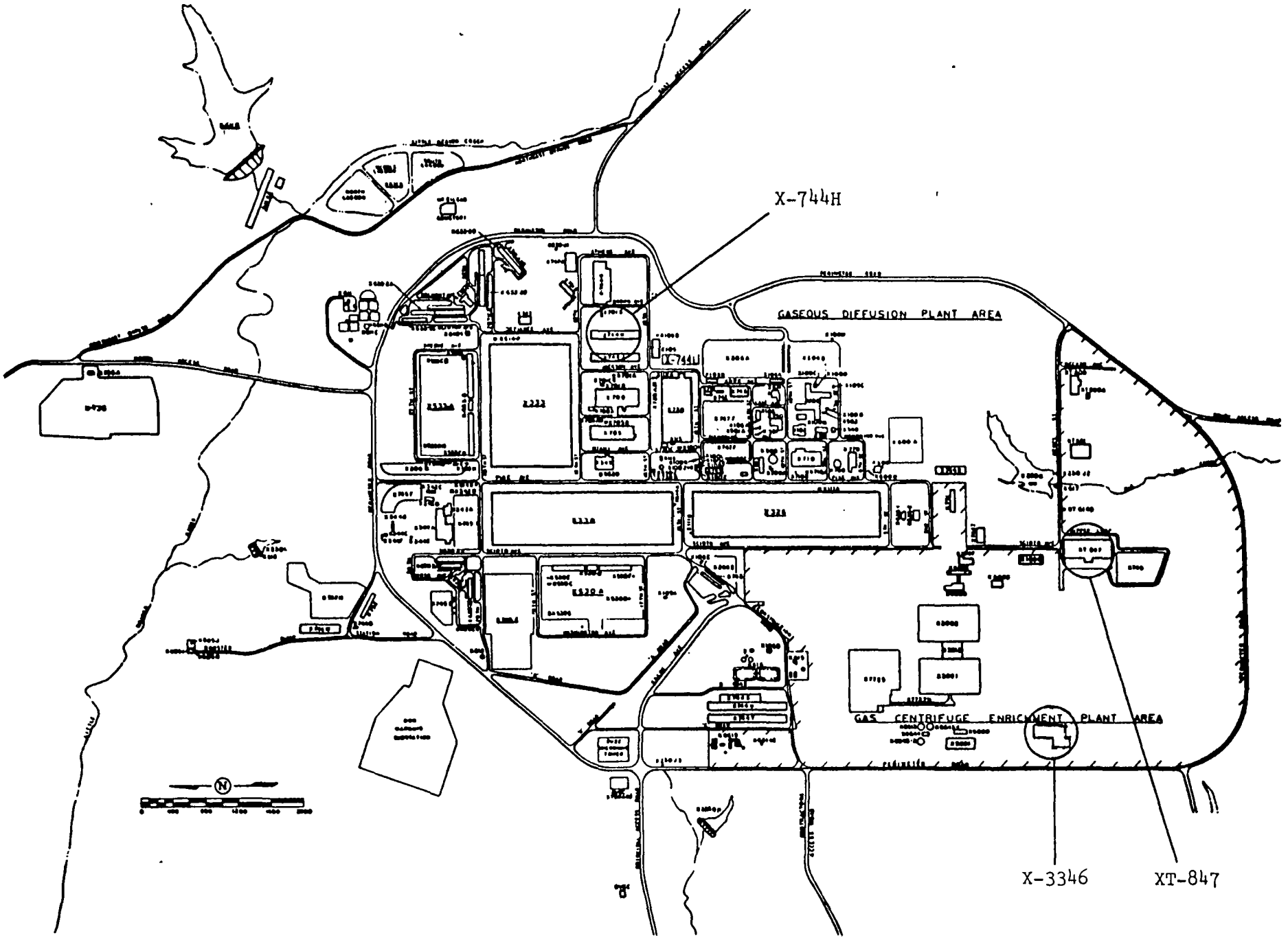
A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED

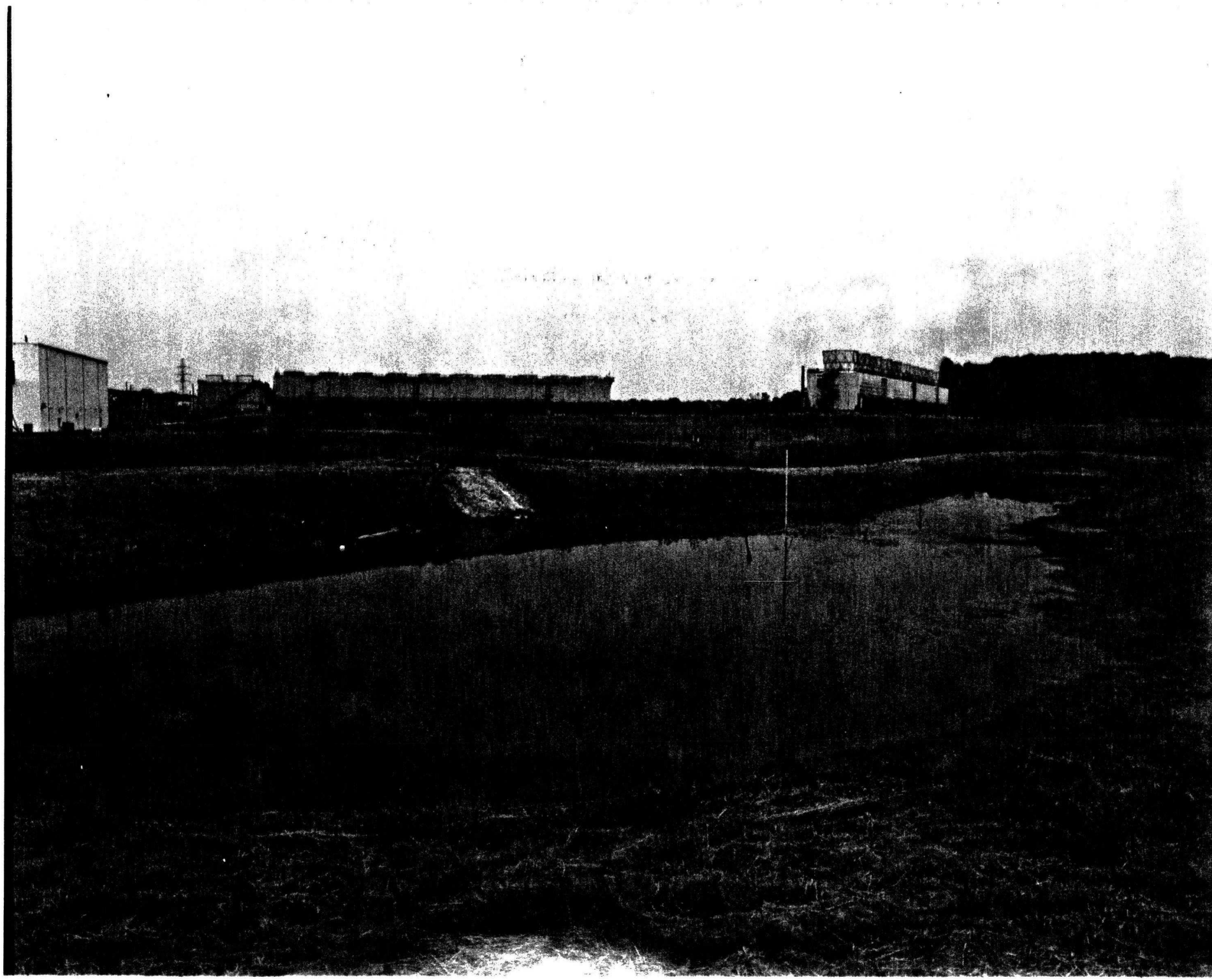
X. OPERATOR CERTIFICATION

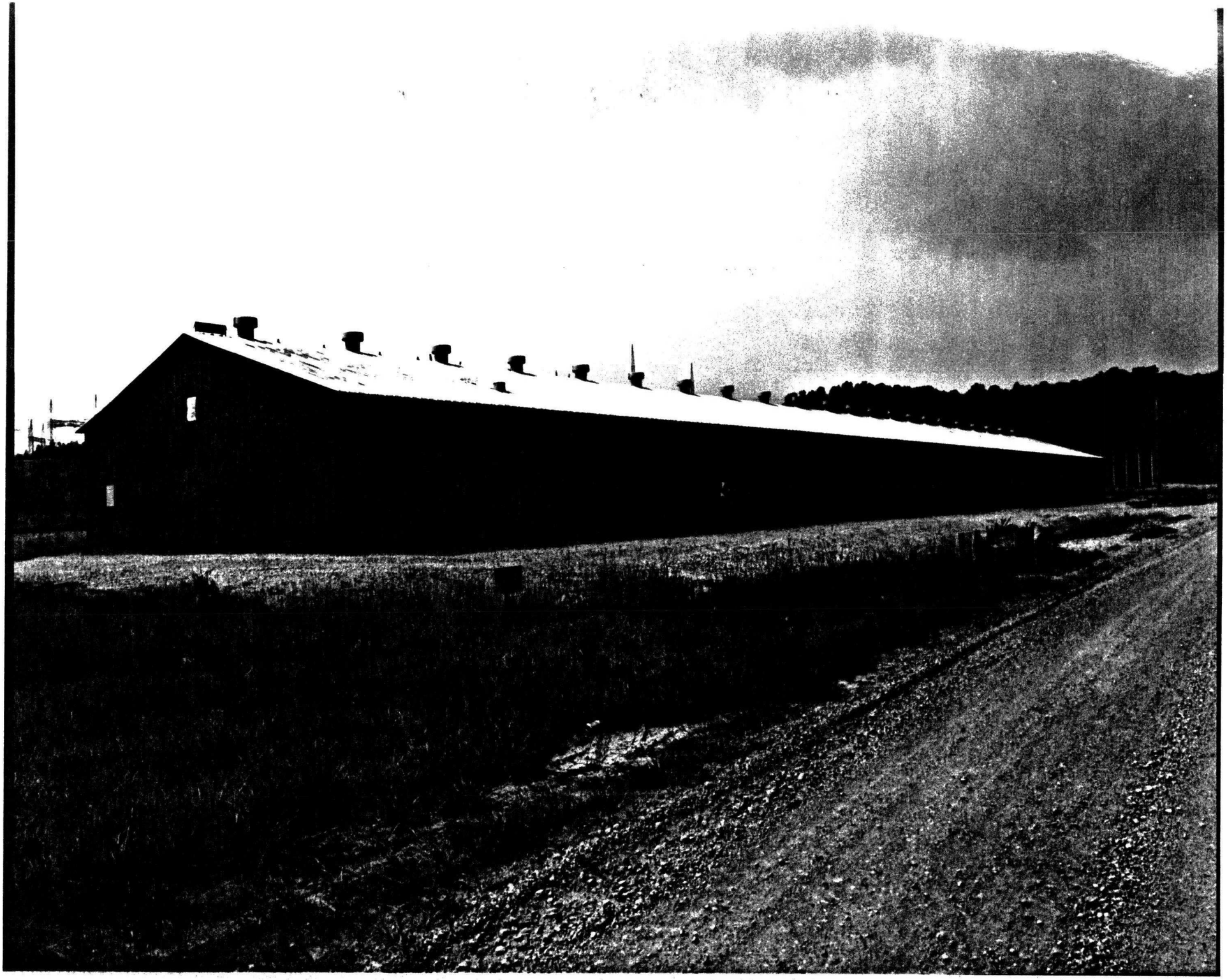
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED

CONTINUE ON PA


X-744H
GASEOUS DIFFUSION PLANT AREA
GAS CENTRIFUGE ENRICHMENT PLANT AREA
X-3346
XT-847






NOTICE
NOTICE


DANGER
DO NOT
ENTER